







**University of Toronto
Library**

**DO NOT
REMOVE
THE
CARD
FROM
THIS
POCKET**

**Acme Library Card Pocket
LOWE-MARTIN CO. LIMITED**

P
Med
J

THE JOURNAL
OF
PSYCHOLOGICAL MEDICINE
AND
MENTAL PATHOLOGY.

EDITED BY

LYTTELTON S. FORBES WINSLOW, M.B. D.C.L.

LECTURER ON MENTAL DISEASES, CHARING CROSS HOSPITAL.

NEW SERIES

VOL. VII. PART 2.

PUBLISHED HALF-YEARLY.

LONDON:

BAILLIÈRE, TINDALL, & COX, KING WILLIAM STREET, STRAND.

DUBLIN: FANNIN & CO. EDINBURGH: MACLACHLAN & STEWART.

NEW YORK: WOOD & CO. PHILADELPHIA: H. C. LEA.

Price Three Shillings and Sixpence.

406761
27.10.42

CONTENTS OF PART 1, VOL. I.

"In Memoriam."—I. Materialism. By J. M. WINN, M.D.—II. Treatment of Melancholia. By BRIERRE DE BOISMONT, M.D.—III. Opio-phagism, or Psychology of Opium Eating. By W. A. F. BROWNE, Esq.—IV. Will and Volition. By W. H. O. SANKEY, M.D.—V. Religious Insanity Metaphysically considered. By the EDITOR.—VI. Mind.—VII. The Delusions of the Insane. By J. G. DAVEY, M.D.—VIII. On the Artificial Feeding of the Insane. By H. SUTHERLAND, M.D.—IX. Dipsomania.—X. Visit to St. Clement's Asylum, Venice.—XI. Clinical Cases.—Reviews, &c.—Psychological Retrospect and Medico-Legal Trials.—Appointments.

CONTENTS OF PART 2, VOL. I.

I. Hereditary Disease. By J. M. WINN, M.D.—II. Arachnoid Cysts. By J. CRICHTON BROWNE, M.D.—III. Condition of Lunacy in England.—IV. Pathology and Treatment of Cerebral Disease. By R. H. SEMPLE, M.D.—V. Reminiscences of Lunacy Practice. By J. G. DAVEY, M.D.—VI. Diseases of the Nervous System. By R. BOYD, M.D.—VII. Morbid Appetites of the Insane. By W. A. F. BROWNE, Esq.—VIII. State Medicine, and its Relations to Insanity and Public Charity. By N. ALLEN, M.D.—IX. Lunacy in Scotland.—X. Notes on Asylum Surgery. By ROBERT LAWSON, M.B.—XI. Lunacy in Ireland.—XII. Lunacy in the Commonwealth of Massachusetts.—Reviews, &c.—Psychological Retrospect and Medico-Legal Trials.—Appointments.

CONTENTS OF PART 1, VOL. II.

I. Professor Tyndall and his Opponents. By J. M. WINN, M.D.—II. Second Sight, or Deuteroscopia. By W. A. F. BROWNE, Esq.—III. Pathology and Treatment of Cerebral Disease. No. II. By R. H. SEMPLE, M.D.—IV. General Paralysis in combination with other Diseases of the Brain. By T. CLAYE SHAW, M.D.—V. Remarks on the Lunacy Acts (Scotland). By JAMES RORIE, M.D.—VI. Diseases of the Nervous System. No. II. By ROBERT BOYD, M.D.—VII. Intemperance and Dipsomania as related to Insanity. By E. C. MANN, M.D.—VIII. Mechanical Restraint in the Management or Treatment of the Insane. By F. MURCHISON, M.D.—IX. Quis Custodiet Custodes?—X. Contributions to Physical Psychology of Criminals. By Professor BENEDIKT.—XI. Natural History of Crime. By Professor BENEDIKT.—XII. Clinical and Physiological Researches on the Nervous System.—XIII. Physical Culture, and its Influence on the Body. By N. ALLEN, M.D.—Case of Homicidal Insanity.—Reviews, &c.—Psychological Retrospect and Medico-Legal Cases.—Appointments.

CONTENTS OF PART 2, VOL. II.

I. Nightmare and Dreaming. By J. M. WINN, M.D.—II. Skae's Classification of Mental Diseases.—III. Pathology and Treatment of Cerebral Disease. No. III. By R. H. SEMPLE, M.D.—IV. The Localisation of the Functions of the Brain. By J. G. DAVEY, M.D.—V. Idiots, Imbeciles, and Harmless Lunatics. By ROBERT BOYD, M.D.—VI. The Psychology of General Paralysis of the Insane. By FREDERICK TREVES, M.R.C.S.—VII. Condition of Lunacy in England and Wales.—VIII. The Physical Signs of Reasoning Madness (Folie Raisonnante).—IX. Problems for Pathologists.—A Note on Spectral Illusions, &c. By W. T. GAIRDNER, M.D.—The Psychological Aspect of the Bravo Case.—Reviews, &c.—Psychological Retrospect and Medico-Legal Cases.—Appointments.

CONTENTS OF PART 1, VOL. III.

I. Materialistic Physiology. By J. M. WINN, M.D.—II. Religio Psycho-Medici. By W. A. F. BROWNE, LL.D.—III. Classification of Mental Diseases. By W. H. O. SANKEY, M.D.—IV. The Physiologist as a Preacher. By J. MILNER FOTHERGILL, M.D.—V. General Paralysis.—VI. Sensori-Motor Affections.—VII. Diseases of the Nervous System. No. III. By ROBERT BOYD, M.D.—VIII. State Medicine in its Relations to Intemperance. By E. C. MANN, M.D.—IX. Military Lunatics.—X. Lunacy in Ireland.—XI. Lunacy in Scotland.—XII. Laws of Hereditary Descent. By NATHAN ALLEN, M.D.—XIII. A Visit to Cairo Asylum. By A. B. R. MYERS.—XIV. Coloured Light in the Treatment of the Insane. By J. RORIE, M.D.—XV. Cases of Heart Disease with Melancholia. By G. H. SAVAGE, M.D.—XVI. Epidemic Paralysis. By DR. BOCKHAMMER.—Reviews, &c.—Psychological Retrospect.—Appointments.

CONTENTS OF PART 2, VOL. III.

I. States of Unconsciousness.—II. Effects of Alcohol on Offspring. By N. ALLEN, M.D.—III. Religio Psycho-Medici. Part II. By W. A. F. BROWNE, LL.D.—IV. Insanity in the Middle States of America. By E. C. MANN, M.D.—V. Sensational Science. By J. M. WINN, M.D.—VI. Pathology and Treatment of Cerebral Disease. By R. H. SEMPLE, M.D.—VII. On Statistical Tables of the Causes of Insanity. By H. C. MAJOR, M.D.—VIII. On Agoraphobia. By H. SUTHERLAND, M.D.—IX. Diseases of the Nervous System. By ROBERT BOYD, M.D.—X. Lunacy in England.—XI. Lunacy in Scotland.—XII. A Death Blow to Spiritualism—XIII. Notes on a Visit to the Asylum of St. Anne, at Paris. By H. SUTHERLAND, M.D.—XIV. The Dillwyn Committee.—The late Dr. Bulckens of Ghelu.—The late Samuel Warren, Q.C., D.C.L., F.R.S., &c. &c.—Appointments in Lunacy Office.—Reviews, &c.—Appointments—Index.

THE JOURNAL
OF
PSYCHOLOGICAL MEDICINE
AND
MENTAL PATHOLOGY.

PART 2. VOL. VII.

NEW SERIES.

CONTENTS.

	PAGE
THOMAS CARLYLE VIEWED PSYCHOLOGICALLY	157
LUNACY IN ENGLAND. (ENGLAND'S IRREN-WESEN.) By C. LOCKHART ROBERTSON, M.D., F.R.C.P.L., &c.	174
A PSYCHOLOGICAL STUDY OF SHAKESPEARE. By R. H. SEMPLE, M.D., F.R.C.P.L., &c.	193
CODIFICATION OF THE COMMON LAW AS TO INSANITY. By E. C. MANN, M.D.	211
MANIA ERRABUNDA. By W. A. F. BROWNE, LL.D.	216
THE ORIGIN AND GROWTH OF DREAMING	222
MATERIALISM AT THE INTERNATIONAL MEDICAL CONGRESS. By J. M. WINN, M.D.	233
VISUAL DISTURBANCES EXPERIENCED	237
LEGAL MEDICINE IN FRANCE	242
LORD BEACONSFIELD VIEWED PSYCHOLOGICALLY	265
ON ALBUMINURIA DURING PARALYTIC INSANITY	270
LUNACY IN SCOTLAND	274
IN MEMORIAM—DR. ISAAC RAY, DR. BILLING	279
REVIEWS AND BIBLIOGRAPHICAL NOTICES	282
APPOINTMENTS	303

Part 1, Vol. VIII, will be published in April 1882.

LONDON :
BAILLIÈRE, TINDALL, & COX, KING WILLIAM STREET,
STRAND.

THE JOURNAL OF PSYCHOLOGICAL MEDICINE.

NOTICES.

Original Communications and Books for Review should be sent to the EDITOR, 23 Cavendish Square, or to the Publishers.

Authors of Original Papers will receive Five Copies of the Journal, and are entitled, should they wish it, to One Hundred Reprints.

The Editor does not hold himself responsible for the views of his Contributors, whose names are affixed.

Part 1, Vol. VIII., of the New Series will be published in April 1882. All Communications must be sent before the end of January.

Gentlemen desirous of receiving the past or future numbers of the Journal will oblige by sending their names and addresses to the Publishers.

The price for each half-yearly number is 3s. 6d. Annual subscription, payable in advance, 7s. post free.

All Communications respecting Subscriptions, Advertisements, and other business matters connected with the Journal to be made to the Publishers, BAILLIERE, TINDALL, & COX, 20 King William Street, Strand, to whom also Cheques and Post Office Orders should be made payable.

We have to acknowledge the receipt of the following:—*Rheumatism, its Nature, its Pathology, &c., by T. J. MacLagan, M.D.; Brain; Le Progrès Médical; The American Journal of Insanity; The Medical Record (New York); New York Medical Journal; The Alienist and Neurologist (St. Louis, U.S.A.); The Australian Medical Journal (Melbourne); Rocky Mountain Medical Review (Denver, Colorado); Therapeutic Gazette (Detroit, Michigan).* Reports:—*Commissioners of Lunacy for Scotland; Annual Report of the Inspector-General of the Insane (New South Wales); State Lunatic Asylum (Utica, New York); 64th Annual Report of the Asylum for the Relief of Persons deprived of their Reason (Philadelphia); Pennsylvania Hospital for the Insane, for 1880 (Philadelphia); 57th Annual Report of the Retreat for the Insane (Hartford, Connecticut), April 1881; 8th Annual Report of the Northern Hospital for the Insane, State of Wisconsin (Madison, Wisconsin); Illinois Northern Hospital for the Insane, at Elgin; Asylum for the Insane (Kingston, Ontario), 1879-80; 23rd Annual Report of Nova Scotia Hospital for the Insane.*

THE JOURNAL
OF
PSYCHOLOGICAL MEDICINE
AND
MENTAL PATHOLOGY.

EDITED BY

LYTTELTON S. FORBES WINSLOW, M.B. D.C.L.

LECTURER ON MENTAL DISEASES, CHARING CROSS HOSPITAL.

NEW SERIES.

VOL. VII.

LONDON :

BAILLIÈRE, TINDALL, & COX, KING WILLIAM STREET, STRAND.

DUBLIN : FANNIN & CO. EDINBURGH : MACLACHLAN & STEWART.

NEW YORK : WOOD & CO. PHILADELPHIA : C. LEA.

M D C C C L X X I.

LONDON : PRINTED BY
SPOTTISWOODE AND CO., NEW-STREET SQUARE
AND PARLIAMENT STREET

THE JOURNAL OF PSYCHOLOGICAL MEDICINE
AND
MENTAL PATHOLOGY ADVERTISER.

OCTOBER 1881.

SCALE OF CHARGES.

	£	s.	d.		£	s.	d.
Six lines and under	0	5	0	A Page	2	0	0
Per line beyond six	0	1	0	Half a Page	1	3	0

W O R K S

BY THE LATE

FORBES WINSLOW, M.D., D.C.L. OXON.

ON THE

DISEASES OF THE BRAIN AND MIND, MEDICAL JURISPRUDENCE
OF INSANITY, AND PSYCHOLOGICAL MEDICINE.

1. *OBSCURE DISEASES of the BRAIN and MIND.* 4th Edition.
2. *The ANATOMY of SUICIDE.*
3. *LETTSONIAN LECTURES on INSANITY.*
4. *The PLEA of INSANITY in CRIMINAL CASES.*
5. *MEDICO-LEGAL COMMENTS on the INSANITY of BURANELLI,*
executed for Murder.
6. *UNCONTROLLABLE DRUNKENNESS VIEWED as a FORM of INSANITY.*
7. *JOURNAL of PSYCHOLOGICAL MEDICINE and MENTAL PATHOLOGY.*
16 volumes. From 1848 to 1863.

'Dr. WINSLOW has, for many years, been *par excellence* the working man in his own branch of medical inquiry. Whilst his contemporaries have rested quietly upon their oars and been satisfied with the labours of past years and the worn-out doctrines of obsolete epochs, this indefatigable physician has, by his writings, given a great impetus to an enlarged and liberal study of the philosophy of insanity, cerebral pathology, and medical psychology; and has, by his untiring and unceasing labours as a physician and a literary man, contributed more than any other man of his day to the dissemination of an improved, humane, enlightened, and curative treatment of the insane. He is a medical jurist in obscure and disputed cases of insanity; a sound, practical physician at the bedside; a gentleman of varied and extensive reading, and of high literary attainments.'—*Lancet*.

DR. L. S. FORBES WINSLOW'S WORKS.

Now ready, post 8vo. price 12s. 6d.

WINSLOW'S MANUAL OF LUNACY

A Handbook relating to the Legal Care and Treatment of the Insane in the Public and Private Asylums of Great Britain, Ireland, United States of America, and the Continent. By LYTTLETON S. WINSLOW, M.B. and M.L. Cantab., M.R.C.P. Lond.; D.C.L. Oxon. With a Preface by the late FORBES WINSLOW, M.D., D.C.L. Oxon.

CONTENTS.

Chapter I.—HISTORY OF LUNACY LEGISLATION. A complete *résumé* of the various Lunacy Enactments.

Chapter II.—PRESENT STATE OF LUNACY IN ENGLAND AND WALES.

Chapter III.—EPITOME OF LUNACY ACTS.

Chapter IV.—ON THE MANAGEMENT OF ASYLUMS AND LICENSED HOUSES.

Chapter V.—PRIVATE PATIENTS. This chapter contains full particulars relative to the confinement in Private Asylums of persons of unsound mind, with special instructions as to the filling up the statement, order, and medical certificates, with a list of all Private Asylums throughout England and Wales.

Chapter VI.—SINGLE PATIENTS. This chapter refers to placing persons of unsound mind under proper supervision with medical men, or others in private houses.

Chapter VII.—PAUPER LUNATICS. In this chapter is given directions for the admission of paupers into County, Private Asylums, or Workhouses, and instructions relative to lunatics wandering at large. A complete list of all County and Borough Asylums is given, with the average cost of maintenance per head.

Chapter VIII.—COMMISSIONS IN LUNACY AND CHANCERY LUNATICS. This chapter gives instructions as to the mode of dealing with the property of persons of unsound mind, with full particulars relative to a writ *de lunatico inquirendo*, and appointment and duties of Committees of person and estate.

Chapter IX.—ST. LUKE'S AND BETHLEHEM HOSPITALS. This chapter contains regulations respecting the admission of patients into these institutions, with the official forms required to be filled up previous to reception.

Chapter X.—LIABILITIES INCURRED BY THOSE CONCERNED IN THE CONFINEMENT OF PERSONS ALLEGED TO BE INSANE. Here are given the various penalties to which medical men and others render themselves liable for infringement of the law in dealing with persons of unsound mind, with an epitome of cases bearing on the subject.

Chapter XI.—LUNACY IN SCOTLAND.

Chapter XII.—LUNACY IN IRELAND.

Chapter XIII.—LUNACY IN FRANCE.

Chapter XIV.—LUNACY IN BELGIUM.

Chapter XV.—LUNACY IN GERMANY.

Chapter XVI.—LUNACY IN THE UNITED STATES OF AMERICA.

These chapters contain instructions relative to the admission of persons of unsound mind into the Public and Private Asylums of these respective countries, with a *résumé* of the Lunacy Acts and complete lists of the Public and Private Asylums and statistics of insanity.

DR. L. S. FORBES WINSLOW'S WORKS—continued.

Chapter XVII.—LUNACY IN RUSSIA.

Chapter XVIII.—RECENT LUNACY STATISTICS AND INSTRUCTIONS. This chapter contains information extracted from the Commissioners in Lunacy's Report last published.

Chapter XIX.—DEFINITIONS AND EXPLANATIONS OF TERMS GENERALLY USED TO DENOTE VARIOUS FORMS OF INSANITY.

Appendix I.—LUNACY ACT 1845, 8 & 9 Vict. cap. 100.

Appendix II.—LUNACY ACT 1853, 16 & 17 Vict. cap. 96.

Appendix III.—LUNACY ACTS AMENDMENT ACT 1862, 25 & 26 Vict. cap. 111. These Acts are given *in extenso*.

Appendix IV.—FORMS OF NOTICES RESPECTING PAUPER LUNATICS AND LUNATICS WANDERING AT LARGE.

EXTRACTS FROM REVIEWS.

'The busy practitioner will find pointed out in this volume the rocks and dangerous quicksands to be avoided; in other words, he can easily ascertain what he may and may not do in reference to the confinement and detention of persons alleged to be mentally unsound, and fit subjects for surveillance.'

EXTRACT FROM PREFACE.
'We may safely say that those who follow the instructions given will not have to plead ignorance of the law as an excuse for its violation, for they will find in it full and precise directions as to all they need to know respecting the care of the insane, either in public institutions or in private houses, while a very copious index will enable them at any moment to turn to the point they may desire to refer to.'

MEDICAL PRESS AND CIRCULAR.

'We anticipate that it will become the *vade mecum* of practitioners in lunacy.'—LAW TIMES.
'It is the first attempt of the kind to embody in a text-book important facts pertaining to insanity in its medico-legal aspect. As a faithful guide in all matters connected with the treatment of lunatics, private and public, it is most invaluable. This work will be as essential to the physician and lawyer as the "Medical Directory" and "Law List" are to members of those professions. It should be found in the library of every barrister and solicitor, as well as physicians and surgeons. It constitutes a complete *vade mecum* on the subject to which it relates. A clear exposition of the various Acts of Parliament connected with the confinement of persons alleged to be insane is given, and plain and easily understood instructions are laid down for the guidance of medical men when called upon to assist in placing under legal restraint persons alleged to be insane, unfit to be at large, or to manage their property.'

JOHN BULL.

'Under the modest title of "A Manual of Lunacy," Dr. Lyttleton Winslow has published a work which is not only a handbook, but a comprehensive digest of every subject connected with the legal care of the insane.'—MEDICAL TIMES AND GAZETTE.

'The book is a most useful compendium of knowledge on a subject on which most medical men are called upon occasionally to act promptly, where the want of such a book of reference may lead, as it often has led, to serious trouble.'—BRITISH MEDICAL JOURNAL.

'This Manual will supply a want long felt.'—THE DOCTOR.

'It is certainly the best book on the subject that has been published for the purpose of general information on this painful but deeply interesting subject. The contents of the work are very varied and interesting, and in style it is easy and clear.'—LAW MAGAZINE.

'There is no more honoured name connected with the humane and intelligent treatment of insanity than that of the late Dr. Forbes Winslow, who, in a preface to the "Manual" written shortly before his death, introduces it to the members of the legal and medical professions as "the first dash into literature" of his son and successor, upon whom we are glad to find the mantle of his father's literary and scientific fame has so early descended. The Manual is a most careful compilation, and displays a considerable amount of knowledge derived from the study of medico-psychological literature, and also from practical experience regarding the laws regulating asylums and the confinement of insane persons. In it will be found everything that a medical man is required to know in regard to the legal confinement of persons alleged to be of unsound mind; and as a book of reference to lawyers, as well as to all persons interested in the legal care of the insane, the Manual and Chart will be found of great use and value. The "Chart" is got up in the form of a well mounted sheet almanack, and, containing a synopsis of the Lunacy Acts and practical directions for immediate action in every emergency, will doubtless find a place on the walls of all licensed or unlicensed houses where persons of unsound mind are confined.'—MORNING POST.

'We can safely recommend this volume, which is written in a clear, succinct style, as a valuable, even indispensable, *vade mecum* to superintendents of asylums, medical practitioners, lawyers, guardians of the poor, and to all who are directly or indirectly concerned, and who are not? in the due administration of the laws affecting the insane.'—DUMFRIES AND GALLOWAY STANDARD.

DR. L. S. FORBES WINSLOW'S WORKS—*continued.*

16mo. price 1s.

HANDBOOK FOR ATTENDANTS
ON THE INSANE.

CONTENTS.

1. Legal Meaning of 'Attendants' in Lunacy Acts.	9. Special Instructions for Attendants: α The Day Attendant. β The Night Attendant.
2. Commissioners' Remarks on Duties of Attendants.	10. Convulsive Attacks, Premonitory Symptoms: α Epilepsy. β Hysteria. γ Apoplexy.
3. Record of Attendants.	11. Management of Paralytic Cases.
4. Liabilities of Attendants: α Ill-Treatment of Patients. β Aiding at an Escape of a Patient.	12. Rules of the Bath.
5. Mechanical Restraint and Seclusion.	13. Death of Patients.
6. Steps necessary for Admission of Patients into Asylums.	14. Refusal of Food.
7. Legal Documents for Admission.	15. List of Private and Public Asylums.
8. Important Facts connected with Medical Certificates.	

'A very useful and practical little book, carefully put together and of small handiness. It would we should think, be found to be very available for the information and more complete training of attendants on the insane, whether in asylums or in private life.'—*BRITISH MEDICAL JOURNAL.*

'We should be glad to see this useful little handbook in the possession of all asylum attendants. It gives them concise and reliable directions as to their duties and responsibilities.'—*THE DOCTOR.*

'A convenient little book. The directions are singularly terse, prudent, and humane.'

PUBLIC OPINION.

'His little book will be invaluable to the class of persons to whom it is addressed; principally for its lucid exposition of the law as affecting their regulations towards those under their charge.'

MORNING ADVERTISER.

SPIRITUALISTIC MADNESS.

Price 1s.

'Dr. WINSLOW's interesting pamphlet has not been published before it is wanted.'

MEDICAL PRESS AND CIRCULAR.

'We trust that it will be widely read, and that it will have the effect of preventing many persons from giving their minds to this dangerous delusion.'—*STUDENTS' JOURNAL.*

'A vigorous and instructive denunciation of spiritualism.'—*THE BROAD ARROW.*

'A very interesting pamphlet.'—*THE WORLD.*

'A clever exposure of the humbug of spiritualism.'—*JOHN BULL.*

'Dr. WINSLOW has done good service by the timely publication of this brochure.'

LANCASTER OBSERVER.

'It is a trumpet-blast to summon all those of moderate minds, of rational convictions, of humble faith, and unsuperstitious sentiments, to join in a firm stand against what he signalises as the common enemy of reason.'—*DUMFRIES AND GALLOWAY STANDARD.*

FASTING AND FEEDING.

Price 2s. 6d.

DR. L. S. FORBES WINSLOW'S WORKS—*continued.*

Varnished, mounted on canvas and rollers, price 4s. 6d.; unmounted, 1s. 6d.

A LUNACY CHART:

Being a Synopsis of the Lunacy Acts, and having special reference to the Management and Care of Persons of Unsound Mind.

The Chart is Varnished and Mounted on Canvas and Rollers and is arranged in the following manner:—

1. Lunacy Officers of the Crown.	8. Attendants in Licensed Houses.
2. Qualifications and Functions of the Commissioners in Lunacy.	9. Boarders in Licensed Houses.
3. The Law in reference to Licenses granted to Asylums.	10. Single Patients in Unlicensed Houses.
4. The Law in reference to the General Management of Asylums.	11. Pauper Lunatics in Asylums.
5. The Law in reference to Admissions, Escapes, Deaths, Discharges, of Private Patients, &c.	12. Chancery Lunatics.
6. Visitation of Commissioners.	13. Lunatics Wandering at Large.
7. Temporary Leave of Absence, Transfer of Patients.	14. Present Condition of Lunacy in England and Wales.
	15. List of Metropolitan Private Asylums.
	16. List of Provincial Private Asylums.
	17. United Counties and Borough Asylums.

It has been the object of the Editor to give a clear exposition of the law upon all these important points, free from all the verbiage which usually obscures the precise and legal signification of Acts of Parliament, and often renders doubtful the intentions of the Legislature. The Chart is so printed that it can be hung up, like a Map, against the wall.

‘Dr. Winslow has published a “Lunacy Chart,” containing a synopsis of the Lunacy Acts having special reference to the management and care of persons of unsound mind. The Chart is framed and intended to hang up in a room. It will be found extremely useful for immediate and hasty reference.’

LANCET.

‘This is an exceedingly useful Chart, comprising in a small compass, a large amount of valuable information relative to the legal care of the insane, and a list of all the county and private Asylums in England and Wales. It will be found a most ready means of reference for a medical man called to act promptly in a case of emergency. It is very neatly got up, and can be easily hung on the wall of a consulting-room, and, being thus always at hand, will save much time and trouble in searching for books among the bookshelves.’—MEDICAL TIMES AND GAZETTE.

London : BAILLIERE, TINDALL, & COX

Works in preparation, to be published shortly.

LIFE of the late Dr. FORBES WINSLOW. Post 8vo.

RELIGIOUS INSANITY. Post 8vo.

INSANITY OF PASSION AND CRIME. Post 8vo.

UNCONTROLLABLE DRUNKENNESS.

T H E

AMERICAN JOURNAL OF INSANITY.

THE AMERICAN JOURNAL OF INSANITY is published quarterly, at the State Lunatic Asylum, Utica, N.Y. The first number of each volume is issued in July.

EDITOR :

JOHN P. GRAY, M.D., LL.D., *Medical Superintendent.*

ASSOCIATE EDITORS :

JUDSON B. ANDREWS, M.D. }
EDWARD N. BRUSH, M.D. }
SELWYN A. RUSSELL, M.D. } *Assistant Physicians.*

THEODORE DEECKE, *Special Pathologist.*

TERMS OF SUBSCRIPTION :

Five Dollars per Annum, in Advance.

EXCHANGES, BOOKS FOR REVIEW, and BUSINESS COMMUNICATIONS may be sent to the EDITOR, directed as follows: 'JOURNAL OF INSANITY, STATE LUNATIC ASYLUM, UTICA, N.Y.'

The JOURNAL is now in its thirty-seventh volume. It was established by the late Dr. Brigham, the first Superintendent of the New York State Lunatic Asylum, and after his death edited by Dr. T. Romeyn Beck, author of 'Beck's Medical Jurisprudence'; and since 1854 by Dr. John P. Gray and the Medical Staff of the Asylum. It is the oldest journal devoted especially to Insanity, its Treatment, Jurisprudence, &c., and is particularly valuable to the medical and legal professions, and to all interested in the subject of Insanity and Psychological Science.

MR. DAVID BOGUE'S LIST.

A POCKET GUIDE TO BRITISH FERNS. By MARIAN S. RIDLEY. Fep. 8vo. cloth, 2s. 6d.

A KEY TO TENNYSON'S 'IN MEMORIAM.' By ALFRED GATTY, D.D., &c. Post 8vo. parchment, 2s. 6d.

SONGS IN THE SOUTH. By RENNELL RODD. Imperial 16mo. parchment, 3s. 6d.

POEMS. By OSCAR WILDE. Third Edition. Crown 8vo. printed on Dutch hand-made paper, handsomely bound in parchment. 10s. 6d.

LONDON CHARITIES, 1881—1882, ROYAL GUIDE TO. Showing in Alphabetical Order their Name, Date of Foundation, Address, Objects, Annual Income, Chief Officials, &c. By HERBERT FRY. Nineteenth Annual Edition. Crown 8vo. cloth, 1s. 6d.

WORDS OF TRUTH AND WISDOM. By Canon FARRAR, D.D., F.R.S. Crown 8vo. cloth, 5s.

HOW TO MAKE THE BEST OF LIFE. By J. MORTIMER GRANVILLE, M.D. Fep. 8vo. cloth, 1s.

LONDON IN 1881. By HERBERT FRY. Illustrated with Bird's-eye Views of the Principal Streets. Eighth Edition, Revised and Enlarged. Crown 8vo. cloth limp, 2s.

UNCLE REMUS AND HIS LEGENDS OF THE OLD PLANTATION. By JOEL C. HARRIS. With Illustrations by F. CHURCH and J. MOSER. Crown 8vo. cloth, 5s.

WILD FLOWERS WORTH NOTICE: a Selection of some of our Native Plants which are most attractive for their Beauty, Uses, or Associations. By MRS. LANKESTER. With 108 Coloured Figures by J. E. SOWERBY. New Edition. Crown 8vo. cloth extra, 5s.

BRITISH WILD FLOWERS BY NATURAL ANALYSIS. Being a Complete Series of Illustrations of their Natural Orders and Genera, Analytically Arranged. By FREDERICK A. MESSER. Demy 8vo. cloth, 10s. 6d.

BRITISH PAINTERS OF THE EIGHTEENTH AND NINETEENTH CENTURIES. With Eighty Examples of their Work Engraved on Wood. Demy 4to. handsomely bound in cloth gilt, 21s.

LITTLE WOMEN; or Meg, Jo, Beth, and Amy. By LOUISA M. ALCOIT. Illustrated with 204 Woodcuts and a Portrait of the Author. Post 8vo. cloth gilt, 18s.

HOME NURSING, AND HOW TO HELP IN CASES OF ACCIDENT. By SAMUEL BENTON, L.R.C.P., M.R.C.S., Examiner to the St. John Ambulance Association, &c. Illustrated with 19 Woodcuts. Crown 8vo. cloth, 2s. 6d.

MUSIC AND MORALS. By the Rev. H. R. HAWEIS, M.A. Ninth Edition. Crown 8vo. cloth, 7s. 6d.

WORKS BY DR. WINN.

MATERIALISM.

Originally published in the 'Journal of Psychological Medicine' for April 1875.

WITH APPENDIX.

'We are glad to see such an essay from a member of our profession, whose extensive reading enables him to cope with the Professor's (Dr. Tyndall's) quotations as easily as his practical knowledge enables him to refute the too positive assertions of the Materialistic School.'—MED. PRESS AND CIRCULAR.

'He has made some strong points and told some truths regarding the tendency of this School of Thought.'—AMERICAN JOURNAL OF INSANITY.

'It is a searching and telling examination into the excesses of the Atomic Philosophy.'

NATIONAL CHURCH.

NATURE AND TREATMENT OF HEREDITARY DISEASE.

'Well worthy of perusal.'—BRITISH MEDICAL JOURNAL.

PLAIN DIRECTIONS FOR DEALING WITH AN INSANE PATIENT.

'A shilling's worth of most useful information.'—MEDICAL TIMES AND GAZETTE.

A CRITICAL TREATISE ON THE GENERAL PARALYSIS OF THE INSANE.

'Will prove of value to medical literature, and of considerable utility to those who are concerned in the treatment of the insane.'—LANCET.

THE COLLAPSE OF SCIENTIFIC ATHEISM.

Originally published in the 'Journal of Psychological Medicine,' Vol. VI. Part I. New Series.

'This is a thoughtful work of the same character as the Author's previous onslaughts on the materialistic philosophy of the day.'—PUBLIC OPINION.

'Altogether apart from its value as a refutation of Atheistic fallacies, the article combines facts with arguments in such an entertaining way as to make it extremely readable.'—DUMFRIES AND GALLOWAY STANDARD.

London : D. BOGUE, 3 St. Martin's Place, W.C.

JUST OUT, NEW WORK BY DR. GUY, F.R.S.—Crown 8vo. price 5s.

THE FACTORS OF THE UNSOUND MIND.

WITH SPECIAL REFERENCE TO THE PLEA OF INSANITY IN CRIMINAL CASES, AND THE AMENDMENT OF THE LAW.

By WILLIAM A. GUY, M.B., F.R.C.P., F.R.S.

Consulting Physician to King's College Hospital; Honorary Vice-President of the Statistical Society; and formerly Professor of Forensic Medicine and Hygiene in King's College, London.

London : THOS. DE LA RUE & CO., Bunhill Row.

THE JOURNAL
OF
PSYCHOLOGICAL MEDICINE
AND
MENTAL PATHOLOGY.

ART. I.—THOMAS CARLYLEVIEWED PSYCHOLOGICALLY.

A howl echoed from John-o'-Groat's to Land's End on the posthumous publication of the "Reminiscences of Thomas Carlyle." This cry of pain and indignation arose from those who had abruptly seen an idol which they had been accustomed to reverence as arrayed in all pomp and power and majesty, desecrated, denuded, and exposed as a coarse, rough-hewn, and somewhat unattractive block; from others who had been the fellow-worshippers with these idolaters when the object of their reverence was desecrated and broken by Iconoclasts of their own creed; and from others who, less enthusiastic in their sentiments, experienced disappointment on the premature disclosure of attributes and circumstances utterly irreconcilable with the object of their intellectual regard. Among the latter I would feel disposed to range myself, regarding Carlyle as one of the most conspicuous thinkers of our age, if not a man of exalted genius; but as further conceiving his powerful mind to be warped, unregulated, and eccentric—or, say, in some of its phases, eccentric. It would be foreign from my purpose and my feelings to do more than allude to the unseemly interneceine squabble existing between his friends and relatives as to the time and mode in which his literary remains should have been brought before the public. My impression is that the author of these memorials did not intend that they should see the light unrevised, perhaps expurgated; but such as they now are, I shall, in my analysis of the lifelong mental condition of Carlyle, confine myself exclusively, almost rigidly, to the facts and illustrations which they contain; as my impression is that

the published works of Carlyle may, in many respects, be accepted as his holiday attire, elaborated and finished with extreme care and difficulty and pain, deserving the designation of the pangs of literary parturition; or that in many cases his works may be compared to his war-paint, seeing that the tomahawk and scalping-knife were more freely used than is consistent with the general character and tendencies of the writer. In employing such materials it will be absolutely essential to our purpose to quote the very words of some of the multiitudinous biographers and critics in order to secure a sufficient amount of accuracy and evidence, so as to avoid the possibility of personal bias; but every effort shall be made to represent the materials provided, scanty though they be, in all kindness and sympathy as well as in philosophical discrimination. I must claim the credence as well as the indulgence of my readers as to the fidelity of the quotations and extracts which I must unavoidably introduce into the text, as the employment of references, inverted commas, &c., would prove not merely perplexing, but would utterly destroy the continuity of the statement. The paucity and the rudeness of the aspects in which Carlyle has represented himself in his "Reminiscences" may be fairly attributed to his conviction that he was merely preparing the outlines of an autobiography. But why Mr. Froude, who is a man high in culture, fine taste, and literary tact, should have permitted such an imperfect sketch, such a mere skeleton, to be obtruded upon those who admired and those who did not admire the author—even before the "wee crimson-tipped flower," the only funeral wreath that was permitted in Ecclefechan churchyard, could have "glinted" on the sage's grave—is incomprehensible.

The future sage of Chelsea was one of nine children of a stalwart, reticent, respectable, but rather repulsive yeoman, who plied in succession the trades of farm-servant, mason, and farmer, in an obscure but romantic valley in the south of Scotland. He belonged to a family possessed of great muscular strength, displaying much eccentricity, and, occasionally, the pugnacity and violent habits which characterised the borderers in the debatable land towards the close of the last century. The tide of hereditary tendencies thus originated may have been swelled by the insanity of Carlyle's mother, who was deranged for some time, removed from home, and, even after her return, spoke absurdly and incoherently. Her child was a small, large-headed boy of singular precocity, being able to speak when fifteen months old, could repeat the heads of any sermon to which he listened, at a time when such discourses were prodigiously long and prosaic, and performed many other

feats in which memory played the most conspicuous part. It is recounted that he became the pet of a village dame, who carried him much to and fro in the village, and, doubtless, imparted much of that folk-lore which was then prevalent in the district ; and, from a trustworthy authority, we learn that she always regarded him as a thoughtful and studious child, who mixed little with the village children, or even with his own brothers or sisters, having a greater relish for the society of his grandfather and other grown-up people, and who was fond of roaming about the fields and hills, always with a book in his hand.

It would be rash to connect this prematurity in age and habits with the early intellectual development recorded ; but, in all cases of rapid enlargement of the brain, it should be recollected that there is a tendency to irregular evolution of its various parts, to cerebral irritations of various origin, as well as with rare psychical qualities. Before reaching his eighth year, and in the marvellously brief period of three months, it is affirmed that he mastered Virgil and Horace, under the tutorage of his clergyman's son, and in such a manner as to astonish his teachers on going to school in the neighbouring village. His physical strength does not appear to have kept pace with the advancement of his knowledge. He was puny, or dwarfish, and his inferiority to his companions provoked that cruel tyranny which even boys are prone to exercise over those who are more defective or defenceless than themselves, and which inflicted upon Carlyle miseries and feelings of retaliation which were never obliterated, and which, poisoning the very fountain-head of gentleness and brotherhood, may have embittered his intercourse with many classes of his fellow-men. During his attendance in this humble academy, two events, important to him, occurred. He formed a boyish friendship with the only individual whom he seems to have sincerely and permanently loved. This was Edward Irving, who seems to have shared in his literary tastes, as well as in his patriotism, and to have preserved a certain influence over his feelings, although unfortunately not over his religious opinions, almost throughout their mutual lives, and until the preacher became first an enthusiast, then a fanatic, and ultimately a theomaniac. The utterance of Mrs. Carlyle herself is almost prophetic when she says, "It was mostly mad people who came running after Carlyle ;" but although the setting sun of the career of both was obscured by gloom or positive darkness, there was neither similarity nor identification in the clouds by which they were surrounded. The second event alluded to consisted in his first tasting of the sweets of fictitious literature, most strictly prohibited by his father as

frivolous, pernicious, and profane ; his introduction to this forbidden honey having consisted in securing an odd volume of "Roderick Random," and in devouring it in solitude in the fields, while his more natural schoolfellows were enjoying the hoisterous attractions of the playground. He ever regarded Smollett as one of the best examples of a pure English style ; and without venturing upon any disputation as to his correctness, we may conjecture that this early impression and opinion —the quaint, gloomy, transcendental theology taught him from the pulpit—as well as his subsequent devotion to the German language, may have mainly contributed to build up that obscure, involved, and parenthetical style of thought and phraseology which afterwards became habitual. His unfamiliarity with the best specimens of the poets and novelists may have prevented him from euphemising the uncouth Doric in which his tongue learned to syllabalyse his thoughts ; but there were other factors at work in preventing him from drawing waters in the well of "English undefiled" and in selecting new or more attractive forms of expression. The most culpable of these was an apparent antipathy and estrangement towards the classical languages, which were then and are still conceived to lay the foundations of purity and perspicacity in construction. "The minister's son was the first person that ever taught me Latin, and I am not sure but that he laid a very great curse upon me in so doing. I think it is likely I should have been a wiser man, and certainly a godlier one, if I had followed in my father's steps, and left Greek and Latin to the fools that wanted them."

This scathing, mature condemnation was uttered in despite of early proficiency and subsequent cultivation, but evidently without appreciation, or rather with a contempt for the benefits which he had himself derived from such studies. It is possible that, from his unfamiliarity with that popular literature which must have fallen under his notice, if it did not attract his admiration, and by its wide divergence from the standard which he had created for himself arose his ignorance or silence upon this subject, and that to such causes may be traced his contempt for the poets and philosophers and *littérateurs*, who adorned the age of which he was himself a prominent ornament, but whom he denounces in such terms as—"Our current literature is like our current life, made up of shams, hypocrisies, counterfeits, deceits, and lies."

Independently, or rather in addition to such considerations as explanatory of the great obtuseness or disregard of the sage towards the most sublime efforts of genius, it must be recollected that there was a radical, probably a congenital defect or inappetency

for music, painting, art, and architecture, to such an extent in reference to the latter, that, when gazing on the glories of York Cathedral, he bluntly confessed his wonder that men could collect and heap-up such piles of stones. But did he even receive impressions of beauty or sublimity from external nature? We can recollect one glance almost of inspiration when gazing down the beautiful valley of Nith from his hermitage in the wilds, where he had buried himself in order to compose a crooked travesty of his youth and early manhood, and the world in general, under the title of "*Sartor Resartus*"; but, in general, the light which shines in upon his consciousness, or blazes out from his imagination, is lurid, while his landscapes are volcanic, sulphureous, phlegothonic, the reflections of the pain and irritation created by dyspepsia and stomachic disease. A rainbow rarely spanned his murky cloudland; and yet the writhing hypochondriac was conscious that his one and only function in life required for its happy pursuit health and robustness. He appeared to be charmed with the pleasing aspect and arrangement of his drawing-room, created by the delicate taste or sense of comfort of his wife; but the suspicion is allowable that he valued this evening resort as much for its comfort, his squatting on the rug, his tobacco, and the presence of a good listener, as for its elegance and beauty. From his infancy a soil appears to have been preparing for the sowing of that seed which was calculated to darken and disfigure even a genial and generous disposition. If his schoolboy days at Annan were bald and barren, except in friendship, his home was equally unattractive; during his early years it was poverty almost penury-stricken, and destitute of almost all the feelings and pleasant amenities which constitute the happiness and much of the primary education of childhood. There was, indeed, one redeeming and beautifying presence which must have irradiated his budding thoughts and emotions in the love and companionship of his mother, which he seems to have treasured with religious tenacity throughout life. She confessed that she did not understand "*Tam's tricks*," but she evidently understood, supported, and strengthened the child, and identified herself with his inner soul; for even on the verge of life he not only often repeated her name, but bemoaned the absence of such a relationship. Yet this loved and trusted guide uttered words tantamount to a confession that her charge was somewhat refractory, violent, and unmanageable.

His father was cold and stern; and although he did not either understand or properly estimate his boy, he desired to cast him in his own iron mould. He is said to have seemed as if he were walled in; he had not the free means to unbosom

himself. It seemed as if an atmosphere of fear repelled us from him. Yet awe, or reverence, or fear, so mystified and misled the son, to whom his ambition prescribed nothing higher than husbandry or orthodoxy, that, as if under the influence of superstition, he magnified his father's attitude and qualities into a Titanic aspect, and regarded him as equal, if not superior, to that grandest of Scotland's sons, Robert Burns. This comparison, it is charitably supposed, was made before Carlyle had read, or read with discrimination, the works of the ploughman poet. This guardian attempted to bend the youthful will to his own settled purpose, but then, as subsequently, signally failed. Such divergences, perhaps, at first amounted to little more than the opposing tastes and tendencies elicited in a domestic controversy carried on by friendly antagonists around the cottage fireside on a winter's evening, recalling the family circle in the "Cotter's Saturday Night;" but they deepened and widened as life rolled on, and as its issues became graver and grander. The patriarch was inevitably disappointed that he could not inspire his son with the reverence or the holy zeal of becoming a pastor in the dissenting sect to which he belonged, or a revised covenanter, and, it might be, the shepherd of the flock, to mingle with which he weekly marshalled his numerous progeny in the bare and humble chapel where they worshipped, and where a chronic dispute was sustained as to whether blinds should be provided for the windows, having, as it was solemnly argued, the effect of shutting out light from the temple of Deity. But this disappointment engendered no niggard spirit in the parent, for, although never possessing more than £100 in his life, his scanty means enabled the aspiring genius to matriculate in the University of Edinburgh, although it is surmised the expenses of his curriculum must have been partly contributed to from private tuition. As a student he was, doubtless, industrious and hard-working, and the anecdote has been preserved that in the library he was regarded as an insatiable glutton in reading, although unfortunately the precise nature of the diet selected has not been ascertained, but it may be confidently asserted that his appetite was omnivorous. It is illustrative of the encroachment of the spirit of egoism, solitariness, and of subjective life, that during this and a subsequent period of residence in Edinburgh, comparatively little is known of his pursuits or companions. This period was marked, not merely by unremitting mental toil, but by a crisis which, it is almost certain, exercised a powerful and detrimental effect upon his constitution and character. He had been destined, perhaps from his cradle, but certainly from the domestic deliberatings and disputations of his family, to be a

minister. "But now that I had gained man's estate, I was not sure that I believed the doctrines of my father's kirk; and it was needful I should now settle it. And so I entered into my chamber and closed the door, and around me there came a trooping throng of phantasms dire from the abysmal depths of nethermost perdition. Doubt, Fear, Unbelief, Mockery, and Scorn were there, and I arose and wrestled with them in travail and agony of spirit. Whether I ate I know not; whether I slept I know not; I only know that when I came forth again it was with the direful persuasion that I was the miserable owner of a diabolical arrangement called a stomach; and I have never been free from that knowledge from that hour to this, and I suppose that I never shall be until I am laid in my grave." Other annotators have darkened this already gloomy picture, and have written that the most brilliant years of youth and early manhood were overshadowed to him by doubt as to his own vocation in life, by repugnance to the pursuits that lay before him, by dyspepsia which never left him, by despondency, by hypochondriasis. But we deeply regret to confess that this melancholy chapter in Carlyle's history is not exhausted. He not only repudiated all connection with his father's creed and church, but Irving drew from him, in the gentlest manner, the confession that he did not think as his companion did of the Christian religion, and that it was vain to expect he ever could or would.

Do we blame the still youthful philosopher for his scepticism? Should we blame the colour-blind for his inability to perceive the most luminous and beautiful rays in the spectrum? Both are mentally incapable of seeing and embracing truths which are patent, even forced upon the attention of much inferior minds. There are individuals originally so constituted that they fail to conceive a Creator or Saviour; there are others in whom such conceptions have been blotted out by disease; and still others who, labouring under mental perversity, feel antagonism for Divine truth, defy the Author of their sufferings, deny the existence of such a Being, and argue against the possibility of such an arrangement in relation to themselves. This intellectual rebellion is often encountered in forms of religious and misanthropical melancholia. Carlyle has written of his own conversion soberly, and in what appears to us appropriate language—certainly in no satirical spirit—a condition probably altogether evanescent. He addressed a long communication to Dr. Chalmers, which is vague and vapoury, realising his own or Göethe's sneer as to thinking about thinking, and which certainly leaves the subject nearly as he found it, and his own convictions hazy and undeclared. His orbit seems to have been far outside and beyond such discussions, and to have

guided him or constrained him into altitudes or abysses where the human intellectual eye could not follow, nor the human mind calculate. This gloom and confusion was doubtless the light in which he lived, the colouring imparted by his malady to the most insignificant as well as to the most sacred of the impressions made on his consciousness ; but it is greatly to be lamented that this sciolist—and I hope he was nothing more—had not recorded a clear, coherent, and precise declaration of his difficulties and uncertainties of what he accepted and what he rejected, of the dogmata upon which other men rest, and has left his admirers as well as his detractors to guess at his creed, or his want of it, and to attribute his extravagances and evasions to the ramblings and ravings of alienation.

It is marvellous that, when rejecting the faith of his father, or recoiling from the forms of worship in which he participated, he did not seek for truth under some other new aspect in one of the many creeds or rituals which were accessible around. It is equally marvellous that he should have remained stolid and uninspired by the persuasiveness of external nature, by the pensive sympathy and unobtrusive piety and example of his mother, that he should not have sought, or sought ineffectually, for enlightenment or consolation from the philosophical authorities with which he must have been familiar ; but, failing to draw knowledge from such sources, his mind seems to have remained a blank, and unimpressionable by religious truth. He often expatiates upon profundities, immensities, eternities, employing the magniloquent sesquipedalian words, not in order to mystify his readers, but in the hope, perhaps, of deceiving himself. Some of his writings betray, in epithets and phrases, the indelibility of early religious forms of expression ; but these are the relics of a former world ; they are merely remembered sounds, and form no part nor portion of the inner reflecting man ; indeed, that he turned from the influence of such holy memories may be suspected from the narrative that, on arriving towards evening at the door of his father's cottage, and finding from the chant of "Plaintive Martyrs," or some equally familiar sound from within, that the family was engaged in worship, he did not join them, nor kneel in humble reverence, at least, of early teaching by those who in all sincerity and simplicity, if not in wisdom, had attempted to train his childish mind to the conception that there was a Being outside mind, to the conception that there was a Being outside himself, above himself, more powerful than himself, and, so far as his thoughts or even imagination could reach, omnipotent.

But we are disposed to find, in the terrible religious cataclysm incorporated with his autobiography, other results than mere

infidelity, or, to use a softer term, intellectual doubt and darkness. We imagine that his whole nature underwent a change, not assuredly sudden nor rapid, but that long-continued affections of the digestive and nutritive organs, although compatible with life and energy and lucidity in certain departments of cogitation, must have sapped and altered the foundations of his original intellectual constitution, and have eventuated in phenomena which may not have been connected in the opinions of those most interested in his career, but are in ours, with the working and fruits of his studies, his supposed discoveries in ethics, and must have exercised an enormous power over every process of ratiocination or reverie in which he engaged, and in imparting not merely acrimony and jealousy to the disposition with which he viewed all surrounding objects, and even in causing a deviation from that course of investigation in which a healthier judgment or imagination would have prosecuted research.

Traces of acidity and ungeniality may be noticed, even on his own confession, in early years; but it was not until Valetudinarianism had penetrated deeply into his system that the revolution occurred which altered the current and course of his thoughts, and even modes of expression, in which he became the Ishmael of literature, and, Titan like, hurled his rocks and club against the serene sky of consecrated usages, beliefs, and hopes, proclaiming everything, save his own rather obscure interpretation, to be sham and shoddy. While resident in Edinburgh, his first literary efforts appear to have been contributions to the *Encyclopadia*, a translation from a French mathematical work, and a poem of creditable merit. His next advance was in the publication of three articles, entitled "Burns," "Thomson," and "Characteristics," so clear, clever, and consequential, as to render it difficult to suppose that they were the production of the hand who wrote "Sartor Resartus." With exceptions of "Wilhelm Meister" and his "History of the French Revolution," all his subsequent works are characterised by the features which we shall subsequently investigate. The former book was enthusiastically received, perhaps because it discovered to English readers new modes of thinking, and an introduction to new thinkers. The latter work has been stigmatised as a rhapsody, which, however, contains many passages of brilliancy and force, scenes in which the figures are artistically grouped, as well as boldly drawn; but it rarely condescends to plain narrative or unimpassioned estimate of character; it is unlike history; and, lastly, had it not been preceded by narratives descriptive of the actual places, personages, and transactions of the period, it could not have been comprehended at all. In the northern metropolis he was the friend

and *protégé* of Jeffrey and Brewster. They fed both his love of distinction and his larder; but it is inexplicable that he should have formed so few intimacies or connections with the crowds of poets, philosophers, wits, and wise men, who at that epoch secured and justified the appellation to Auld Reekie of the Modern Athens. It may be conjectured that politics or personal peculiarities might have shut out Carlyle from Blackwood's coterie or the Parliament House; but his isolation in the very centre of authorship is difficult to understand. From this stage in his progress a very discernible change in his composition in many of his convictions, and, in all probability, in his relations to society, may be noticed, nearly contemporaneous, it should be marked, with the aggravation of his stomachic malady and nervous irritability, and his retirement to the highlands of Dumfriesshire, where he engaged in the elaboration of that uncouth metaphysical romance, "Sartor Resartus," which probably he approached with the same sense of loathing and compunction that attended his embodiment of his more pretentious historical works. Here likewise commenced the evolution of what has been epigrammatically styled the "Mirage Philosophy," as implied to the melancholy impressions of dust, rags, shabbiness, mildew, and cobwebs inhabited by monstrous spiders, which constantly crossed Carlyle's imagination, and which must, even to a cheerful nature, which he was not, inevitably have caught a sympathetically mournful, if not dreary hue. It is confessed that this and multiform ideas of the same kind were derived from the transcendental philosophy of Fichte, which is—

"That all things which we see or work with in this earth, especially we ourselves and all persons, are as a kind of vesture or sensuous appearance; that under all these lies, as the essence of them, what he calls the Divine Idea of the World; that is, the reality which lies at the bottom of all appearance. To the mass of men, no such Divine Idea is recognisable in the world; they live merely," says Fichte, "among the superficialities, practicalities, and shows of the world, not dreaming that there is anything divine under them."

Such sentences as this, where the sense is evasive, or where the meaning escapes our penetration, justify the impression that when we find, as we sometimes do, that the style continues while the thinking is left out, the marvel becomes a prodigy or an incoherence.

The author has often written so metaphorically and elliptically that the fault may be ours in failing to distinguish between what is a mere flourish of rhetoric, a truth, or, to use Mr. Froude's word, a delirium.

Some time since, and in this Series (Vol. IV., No. 2), we preferred, to a description of the mental delirium or logo-diarrhoea to which the self-suicidal Coleridge had reduced himself by his psychical habitudes or physical habits, to quote a portion of his writings, and this course was adopted on the suggestion or rather by the aid of Carlyle. There was in the extract no positive incoherence and but slight inconsequentiality, but the power of constructing lucid and logical statements seemed to have escaped the writer, who was carried on blindly and blunderingly through mazes of words which it was impossible to unravel and to a point which vanished into thin air. This analysis is in a measure applicable to the following extracts from Carlyle, and which have been cited by his critic as an illustration of imaginative power and inconsistency :—

“ Truly it may be said the Divinity has withdrawn from the earth, or veils Himself in that wide-wasting whirlwind of a departing era, wherein the fewest can discern His goings. Not Godhead, but an iron ignoble circle of necessity embraces all things: binds the youth of these times into a slattern, or else exasperates him into a rebel. Heroic action is paralysed, for what worth now remains unquestionable with him ? ”

And again :

“ His melodious stanza, which he cannot bear to see halt in any syllable, is a rough fact reduced to order; fact made to stand firm on its feet, with the world-rocks under it, and looking free towards all the winds and all the stars. He goes about suppressing platitudes, ripping off futilities, turning deceptions inside out. The realm of Disorder, which is unveracity, Unreality, what we call Chaos, has no fiercer enemy. Honest soul! and he seemed to himself such a stupid fellow often: no tongue learning at all; little capable to give a reason for the faith that was in him. He cannot argue in articulate logic, only in inarticulate bellowings or worse. He must do a thing, leave it undemonstrated; once done, it will itself tell what kind of thing it is by-and-by. Men of genius have a hard time, I perceive, whether born on the throne or off it, and must expect contradictions next to unendurable, the plurality of blockheads being so extreme.”

These revelations may be prophetic, or mystic, or thaumaturgic, but to the perception of the vulgar and uninspired votary they sound very like unconsequential rodomontade.

These paragraphs are not paraded as proof of the failing faculties of the sage, for we believe they were written in his meridian, but testify strongly to that involution or perplexity of illustration which was, or might be, a forerunner of the feeble, parenthetical, often absurd phraseology, traceable in the

“Reminiscences” of his wife. It would have been as easy to have washed an Ethiopian white as to convert Carlyle to the familiar and classical language of English literature. An analyst of his mode of composition has epigrammatised it as the eccentric exponent of eccentricity. He treats as unintelligible what he did not give himself the trouble to understand, and thinks he has disposed of the population principle by fostering a senseless prejudice against it, and of the Utilitarian philosophy by calling Bentham a bore of the first magnitude. He did not write English, but badly-translated German—a peculiarity engrafted perhaps on his mind after maturity had been reached, but undoubtedly intensified by that torture, those agonised convulsive throes, to which he subjected his reasoning or his emotions during the process of composition. His constant recourse to pet epithets, nicknames, or cant phrases, such as “the little Kaiser in the red stockings,” greatly deform and obscure his writings, and give rise to the suspicion either that he is laughing in his sleeve at his readers, as when describing his most admired production as play-acting or prophecy; or that this habit may have been assimilated to that iteration of words or syllables so often observed in the soliloquies of those who are partially deranged. This act may have been voluntary, but it certainly had a morbific origin. But, although reluctant to detect in his style in declining years indications of growing imbecility, except in the instance alluded to, there are other indications, and these of a more painful character, of perverted feeling and unfair judgments connected with his decline. An able apologist, even champion of Carlyle, who has entered the lists in order to denounce Mr. Froude for having published the “Reminiscences” at all, or at all events without deletion, expurgation, and rearrangement, reveals that even in her estimation he had passed into second childhood, that his utterances were those of a mind diseased. His works and composition betray mental decay and unvarying peevishness, and, viewed as a whole, his deportment latterly was that of a diseased state of mind. There is another count added to this sad indictment when the enfeebled octogenarian is accused of ingratitude, of profaning and abusing the hospitality and friendship of those who conferred upon him benefits as well as protection or patronage. But while it must be confessed that a loss of the higher and purer feelings often accompanies the decline of life, and while we would prefer to any other supposition the theory of even a contemner of Carlyle, that he was not himself when he felt and acted thus, it would be unjustifiable to omit this forgetfulness of obligations and kindness from the symptoms of actual disease.

But while octogenarianism may be admitted as a factor of the painful manifestations to which I am hastening, it cannot be concealed that many of these denunciations occurred when he was in the vigour of manhood, or in such vigour as his constitution ever possessed, and that no excuse nor explanation of their occurrence can be discovered except in his rudeness, churlishness, ill-temper, or in the writhing of local pain or the bitter feelings of retaliation on all around indiscriminately, which sometimes ascend from the *cœnesthesia* to the subversion or perversion of the sentiments and higher emotions. It has been questioned whether he was not suffering under some chronic malady, moral or physical, which might have swayed him in his own despite; and it might be surmised that the discomforts of his social position engendered a general feeling of discontent, self-absorption, and retreat from the world as it was; and that throughout his career there was much to contract his range of thought, and to concentrate his thoughts and feelings upon himself and his doings and sayings so as to render his faculties at last altogether incapable of embracing a wide scope of nature and of man, and even to impart a vague hostility against everything and every person around. The virulent caricatures of those who occupied the same level as he on the world's platform, or had been elevated to a more distinguished place, or of his own familiar friends, consisted in detractions and defamations of various kinds and degrees, which must be grouped together in order to present some conception of the general unhealthy tone of mind which prevailed. There is not, in fact, in all the wild waste or chaos of the world which he has painted, one spot upon which the dove, or rather more correctly the raven, could have rested a foot. He attacks Jeffrey with a degree of malignity not commonly addressed even to benefactors; he sets down Lamartine as a grimacing caricaturist; Thiers as superior to Lamartine, but unfaithful and unscrupulous as a writer; and Guizot as cadaverous, undecided, and as perhaps believing in the resurrection of Louis Philippe; whilst he huddles together De Quincey, Procter, Adam Smith, Malthus, Bentham, Howard, and Clarkson as having no human stuff in them because they did not make their way by force. Of the gentle, genial, exquisitely witty, though unfortunate, Charles Lamb, he dares to assert that he was a poor thing with an insuperable proclivity to gin, with a talk contemptuously small, a ghastly make-belief of wit, more like diluted insanity, usually ill-mannered. Of Wordsworth he says, with what may be accepted as forbearance, that he wrote poetry in a sort of limpid way; and as a hard-tempered, rather dull, unproductive, and almost wearisome kind of man. He depicts the gallant and romantic Shelley as a

ghastly object, colourless, pallid, without health or warmth or vigour. The noble, whole-hearted Southeby appears to have secured his sympathies, or a ray from them, less by the multiplicity and grandeur of his gifts of genius than by some accidental coincidence and compatibility in political or philosophical discussion, but one, and that the most saintly, member of his family was assailed. The patriotic Hampden he did not like. The philanthropic Wilberforce, recognised by world-wide fame as humane and heroic, he calumniates as the famous nigger-philanthropist, drawing-room Christian, and busy-man and politician ; but yet the unfortunate obliquities of this sufferer's moral perceptions were such that he could praise Mirabeau, the worst product from the caldron of the French Revolution ; he could dote on and dally with the mad Frederick as well as the bad Frederick, and could almost beatify Cromwell. Even the females of his circle of intimates do not escape from misconstruction and misrepresentation. Even the kind and courtly Mrs. Montagu is spoken of sarcastically ; Jeffrey's daughter is harshly treated ; the wife of his dear friend Irving is described as diseased and deformed—a calumny which has provoked controversy, in which the epithets malevolence, wanton misstatement, and cruelty are ventured upon with a rash forgetfulness of the peculiar infirmities of the maligner. It would be fatiguing to load these pages by swelling this catalogue with more than the names of those who have been perpetuated by sneers or faint praise in what may be styled the Carlyle literature : Leigh Hunt, Bookseller Tait, Allan Cunningham, Old Lady Holland, whom he describes as a kind of hungry ornamented witch looking over him with carnivorous views, the patriots Hampden, Elliot, and Pym, Sir W. Molesworth, Mazzini, Mrs. Taylor, Harriet Martineau.

There are certain marked periods in a life at which new mental qualities or phases come into prominence. These are puberty, the decline of vigour, and vivacity. It has been observed that, when we attain the stage when manhood merges into age, the watershed of mental existence, as it may be called, certain incompatibilities, contrarieties, irritabilities, exercise a power over the individual and all surroundings hitherto unnoticed, even unsuspected. Might not this be the case with Carlyle ? or might not—we utter it reverently—a similar constitutional change have occurred in his companion—or, again, it may have been that the hitherto gentle, discriminating, dutiful, almost worshipping companion, who had idolised, who had spoiled the sage with whom she had been associated ; while, offering her adulation or adoration on the shrine or in the measure which he was accustomed to receive from his own family, showed

less reciprocity than she had been accustomed to do in youth and during the growth or maturity of the sturdy and summer affections and passions, and thus estrangement may have sprung up. One who loved her, and painted her in glowing and generous colours, writes:—

“ She for her part—let us not be misunderstood in saying so—contemplated him, her great companion in life, with a certain humorous curiosity, not untinged with affectionate contempt and wonder that a creature so big should be at the same time so little, such a giant and commanding genius with all the same so many babyish weaknesses, for which she liked him all the better.

“ We never marry our first love, it has been speculated ; it is highly possible that in every romantic conjugal tie the contact is with an abstraction and not with the human member of the union. It may have happened that, as time wore on, and as mental infirmity increased, the gigantic baby may have found in his wife less a companion than a critic, less a minister to his wants and wishes than an observer of much that she loved or pitied or palliated, but could not justify or admire. There is no harder task than to watch over the daily wants, real and imaginary, for a man of genius cursed with a bad digestion, intolerant of the slightest noise (for to Carlyle the cocks and hens in his neighbours' yard were demon fowls), irritated by contradiction and of an atrabilious temperament. In this case these sources of vexation would be greatly exaggerated by the labour and annoyance which seems to have attended the act of composition. On joining his patient admirer after a day of toil, and possibly after disturbing and distracting the feeble, if not dying, woman by incessant narratives of obscure battles, he describes his way of working during his season of labour, and his long wrestling, thirteen years and more, with the Friedrich nightmare affair, and the disgust and loathing his efforts had inspired, during which he seemed to have suspended, or in great measure avoided, all except obligatory intercourse and correspondence.

The episode devoted to a memorial of his wife may be regarded, according as it is accepted, as a maudlin, maundering, or morbid monody, replete with epithets of affection or ill-judged fragmentary incoherences, or puerilities, such boyish endearments occurring 133 times in 235 pages, rather than with expressions of the manly sorrow of a stricken heart. Or it may be interpreted as an outpouring of compunction, as an offering to the manes or memory of one whom he had failed sufficiently to appreciate, with whom he had stood in relation of coldness and estrangement rather than of genial affection. Or there may

be found in its pages glimpses of nature, a genuine regret for an amiable and worshipping companion whom he had lost for a support and succour, ever present to minister to his wants and weakness, mingled with much that is painful, unseemly, and extravagant. It must, however, be remembered that the Paper was written when the shadows of evening were gathering around a troubled and shattered life, and when his habitual malady may have shaken the frame to its very centre. Years before the final close of life, and when able to mingle with friends and relatives, and when soothed and strengthened by the affection and judicious influence flowing from these sources, he complained to a medical man of great irritability and *per vigiliū*, that heritage and penalty of an active and ardent brain, and that after the short sleep which had been secured by long exposure to the open air, he felt as if a thousand devils were gnawing his heart. We shall allow a lenient and laudatory intimate to depict the sad lineaments of his declining days: “‘They will not understand that it is death I want.’ Then he told me of the weakness that had come over him, the failing of age in all his limbs and faculties, and quoted the psalm (in that version which we Scots are born to):

Threescore and ten years do sum up
Our days and years, we see,
And if, by reason of more strength,
In some fourscore they be;
Yet doth the strength of such old men
Bat grief and labour prove —

Neither he nor I could remember the next two lines, which are harsh enough, Heaven knows; and then he burst forth suddenly into one of those unsteady laughters. ‘It is a mother I want,’ he said with mournful humour; the pathetic incongruity amused his fancy, and yet it was so true. The time had come when another should gird him and carry him often where he would not. Had it been but possible to have a mother to care for that final childhood !”

“The first sight I had of him, after his wife’s death, was in her drawing-room, where, while she lived, he was little visible except in the evening to chance visitors. . . . He was seated, not in any familiar corner, but with the forlornest unaccustomedness in the middle of it, as if to show by harsh symbols how entirely all customs were broken for him. He began to talk of her, as if the one subject of which his mind was full, with a sort of subdued, half-bitter brag of satisfaction in the fact that her choice of him, so troublesome a partner, so poor, had been justified before all men, and herself proved right after all in her

opinion of him which she had upheld against all objections ; from which, curiously enough, his mind passed to the mythical, as he calls it, to those early legends of childhood. . . . With that pathetic broken laugh, and the gleam of restless, feverish pain in his eyes, he began to tell of this childish incident ; how his wife had been carried to the ball in a clothes-basket, perhaps the loveliest little fairy that was on the earth at the time. The contrast of the old man's already tottering and feeble frame, his weather-beaten and worn countenance, agitated by the restless grief and the suggestion of this loveliest little fairy, was as pathetic as can be conceived, especially with the laugh of emotion that accompanied it. . . . His old wife was still so fair to him, even across the straits of death—had returned indeed into everlasting youth. . . . When there was reference to the circumstances of her death, so tragical and sudden, it was with bitter wrath, yet wondering awe, of such a contemptible reason for so great an event."

We shall not further penetrate into the solemn and sacred gloom which should surround the expiring energies of this great man, but shall leave to Mr. Froude to withdraw the veil which we, with a sense of relief, allow to fall.

The following works have been read and reread in the construction of the foregoing analysis :

Reminiscences. By Thomas Carlyle. Edited by Anthony Froude, in 2 vols., 1881.

Thomas Carlyle : The Man and his Books. By Wm. Howie Wylie, 1881.

Thomas Carlyle : The Iconoclast of Modern Shame. By Rev. J. Wilson, M.A. Albernyte, 1881.

Thomas Carlyle. An Essay. By General Sir E. B. Hamley, 1881.

The Athenæum, Nos. 2,785, 2,786, 2,790.

Macmillan's Magazine, April 1881. (Mrs. Oliphant.)

Quarterly Review, July 1881.

Edinburgh Review, July 1881.

Contemporary Review, June 1881. (Miss Wedgewood.)

Nineteenth Century, June 1881. (Taylor.)

July 1881. (Froude), &c., &c.

British Quarterly Review, July 1881. (Larkin.)

ART. II.—LUNACY IN ENGLAND. (*England's Irren-Wesen.*)

The Address read at the opening of Section VIII. Mental Diseases of the International Medical Congress, by C. Lockhart Robertson, M.D., Cantab., F.R.C.P., Lord Chancellor's Visitor in Lunacy, President of the Section.

GENTLEMEN,—In now opening the eighth section of this great International Medical Congress, and in offering to the alienists of Europe and America our cordial welcome to London, I must ask leave to explain to you that it is only by the accident of official position as senior physician to the Lord Chancellor, who, under the Royal prerogative and by statute, has in England the guardianship of all lunatics and persons of unsound mind, that I occupy to-day this presidential chair. But for the desire of the Executive Committee thus to recognise the paramount authority of the Lord Chancellor in our department of medicine, I cannot doubt that the place I now fill would have been allotted to our most distinguished English writer on lunacy, Dr. J. C. Bucknill, one of the vice-presidents of this Congress, whose writings and whose name are a household word in all the asylums where the English tongue is spoken. Called from my official position rather than on personal fitness to preside in this section, I may the more venture to ask at your hands a generous interpretation of my efforts, so to guide your deliberations here that they may advance the science and practice of this department of medicine in which we are all enrolled.

I think I shall best use this occasion by laying before you a brief statement of the present condition of the insane in England, and of the manner and method of their care and treatment. In the German tongue the word *Irren-Wesen* exactly expresses the subject of this address.

The number of the insane in England of whom we have official cognisance is about 71,000, being in the ratio of 27·9 per 10,000, or 1 in 350, of the population. Of these no less than 63,500 are paupers chargeable to the rates and maintained at the cost of the community. The remaining 7,600 are private patients, whose means vary from £50 to £50,000 a year, much the larger number being nearer £50, for insanity necessarily tends, by arresting the power of production, to the impoverishment of its subjects. Thus, of the total of the insane in England, 90 per cent. are paupers maintained at the

public cost, and 10 per cent. only are kept by their own resources.

There has, since the passing of the Lunacy Act of 1845, been a great yearly increase in the registered numbers of the insane, an increase chiefly if not solely among the pauper class, which admits of satisfactory explanation, as I have elsewhere* endeavoured to show, without accepting the popular fallacy of an increase of insanity; a theory which, if carried to its logical conclusion, leads us to the result that as the registered lunatics in 1845 were as 1 to 800 of the population, while in 1880 they stand, as I have just stated, as 1 to 350, therefore lunacy in England has more than doubled during the last thirty years, which is a manifest fallacy. I only regret that my present limits preclude farther reference to this interesting problem.†

My first table exhibits the number of the insane in England, with their place of residence and their proportion to the population in the decenniums 1860, 1870, and 1880. This table shows that the total registered number of the insane has risen from 38,000 in 1860, to 71,000 in 1880, and the ratio to the population from 19.1 per 10,000 to 27.9. It is evident from my figures that this increase is mainly in the pauper class. The private patients in 1860 numbered 5,065, in 1880 they were 7,620, and their ratio to the population 2.5 and 2.9 respectively, an increase of .4 only, as compared with the increase of 8.8 among the pauper lunatics, on each 10,000 of the population.

TABLE I.

Showing the number of Lunatics in England and Wales in the several decenniums 1860, 1870, 1880, with their Place of Residence and their Proportion to the Population.

Where detained (Place of Residence)	1860			1870			1880		
	Private	Pauper	Total	Private	Pauper	Total	Private	Pauper	Total
In Public Asylums.	2,000	17,442	19,442	2,780	28,229	31,009	3,754	39,986	43,730
In Private Asylums.	2,948	1,352	4,300	3,144	1,760	4,904	3,398	1,141	4,549
In Workhouses . . .	None	8,219	8,219	None	11,358	11,358	None	16,464	16,464
In Private Dwellings	117	5,980	6,097	356	7,086	7,442	468	6,980	6,448
Totals . . .	5,065	32,993	38,058	6,280	48,433	54,713	7,620	63,571	71,191
Ratio per 10,000 of the population }	2.54	16.58	19.12	2.79	21.52	24.31	2.99	24.95	27.94

* *The alleged Increase of Lunacy*, Journal of Mental Science, April 1869. A *Farther Note on the alleged Increase of Lunacy*, Journal of Mental Science, January 1871.

† In the Report of the Scotch Commissioners in Lunacy for 1880, this question

Table II. gives the distribution per cent. of the 71,000 registered lunatics in England and Wales, and I have here contrasted the same with that of the 10,000 lunatics registered in Scotland.

TABLE II.

Showing the Distribution per cent. of all Lunatics in England and Wales and in Scotland in 1880 (January 1st).

	DISTRIBUTION PER CENT.					
	In England and Wales			In Scotland		
	Private	Pauper	Total	Private	Pauper	Total
In Public Asylums*.	5·0	56·5	61·5	14·6	61·0	75·6
In Private Asylums†	5·0	1·5	6·5	1·6	None	1·6
In Workhouses‡ . .	None	23·0	23·0	None	7·0	7·0
In Private Dwellings§	·5	8·5	9·0	1·1	14·7	15·8
Total . . .	—	—	100	—	—	100

Table II. is interesting as contrasting the total distribution of lunacy in England with that of Scotland. In England 61·5 per cent. of the lunacy of the country is maintained in the public asylums. In Scotland it reaches 75·6 per cent., while, on the other hand, the proportion of patients in private asylums is 6·5 per cent. in England as against 1·6 in Scotland. In England 9 per cent. only of all lunatics are placed for care in private dwellings; in Scotland the proportion rises to 15·8. In England we have 23 per cent. in workhouses; in Scotland there are only 7 per cent.

Table III. gives the relative distribution per cent. of private and pauper lunatics respectively in England and Wales, and in Scotland.

of the apparent increase of insanity is ably discussed, and dealt with in a careful statistical inquiry. I can only here give their conclusion:—“ We have frequently pointed out that the difference in these rates of increase is not necessarily due to an increasing amount of mental disease, but is probably due in a large measure to what is only an increasing readiness to place persons as lunatics in establishments.”

* Including County and District asylums and Scotch Parochial asylums, lunatic hospitals and Scotch chartered asylums, naval, military, and East India asylums, Idiot asylums, Broadmoor Criminal Asylum, and Perth Prison wards.

† Including provincial and metropolitan licensed houses.

‡ Including the metropolitan district asylums.

§ Including 208 Chancery lunatics residing in the private houses of “ the committee of the person.”

TABLE III.

Showing the Distribution per cent. on their several Numbers of the Private and Pauper Lunatics respectively in England and Wales and in Scotland in 1880.

Where Maintained.	DISTRIBUTION PER CENT.			
	In England and Wales.		In Scotland.	
	Private.	Pauper.	Private.	Pauper.
In Public Asylums	49·0	63·0	84·0	73·7
In Private Asylums	43·0	1·6	9·5	None
In Workhouses	None	26·0	None	8·5
In Private Dwellings	8·0	9·4	6·5	17·8
Total	100	100	100	100

Table III. brings strikingly before us the existing difference in the method of care and treatment of the insane in the two kingdoms. In England 43 per cent. of the private patients are in private asylums, while in Scotland the proportion is 9·5 only. The public asylums, on the other hand, have 84 per cent. of the Scotch private patients under treatment as against 49 in England. In England, owing to the traditional preference of the Court of Chancery for private dwellings for the care of its wards, we find the proportion of patients so placed stands as 8 to 6·5 in Scotland, while with pauper lunatics these figures are reversed, the proportion in England being 9·4 as contrasted with 17·8 in Scotland.

I. PUBLIC ASYLUMS.

There are 43,700 patients in the public asylums of England, or 60·5 per cent. of the whole lunacy of the country. Of these 40,000 are pauper lunatics, and 3,700 are private patients. The former are maintained in the county and borough asylums, the latter are divided between these and the registered lunatic hospitals.

(a) *County and Borough Asylums.*—The county and borough asylums of England,* sixty in number, contain 40,000

* A return was ordered by the House of Commons to be printed August 14, 1878, of the cost of construction of each of the county asylums, the number of beds, the annual and weekly maintenance rate, the percentage of recoveries, deaths, &c. Unfortunately it has been, as regards England, carelessly prepared, and no abstract or summary of its contents or averages are given. It is impossible to make out

beds, varying from 2,000 to 250. They have been built and are administered under the provisions of the Lunacy Act of 1845. The average cost per bed has been under £200; the weekly maintenance of each patient is 10s., to which must be added the interest on the cost of construction and the yearly repairs of the asylum, which are borne by the county rate, bringing the yearly cost for each pauper lunatic maintained in the county asylums to nearly £40.

The government of the English county asylums is entrusted, by the Lunacy Act, 1845, to a committee of the justices of the peace, under the control of the Secretary of State for the Home Department. The administration is in the hands of the resident medical superintendent. A yearly inspection of the asylum is made by the Commissioners in Lunacy, and a yearly medical and financial report is presented by the committee and medical superintendent to the quarter sessions, and published.

The proportion of cures (discharged recovered) in the county and borough asylums in the last decennium, 1870-80, was 40.28 per cent. on the admissions, and the mortality 10.59 on the mean population. In Scotland, during the same period, the recoveries were 41.6, and the deaths 8. The only private patients admissible under the statute are those bordering on pauperism, and whom the law requires, as to classification, diet, clothing, &c., to be treated as the paupers. Herein the English county asylums differ from those on the continent of Europe and in America, where alike, and I think most wisely, special and often excellent provision exists for the care and treatment of private patients. At the public asylums near Rouen, at Rome, at Munich, and at Utica, in the States, I have seen extremely good accommodation provided for private patients.

In Mr. Dillwyn's Lunacy Law Amendment Bill, 1881, which was read a second time on May 25, but has since been withdrawn for this session, there was a clause (section 4) enabling the visitors of county asylums to provide there suitable accommodation, by additional buildings or otherwise, for private patients. I regard this proposal as one of the most important reforms, since the Lunacy Act of 1845, in the treatment of the insane of the middle class, providing as it would for the small ratepayers, at a cost within their means, such care and treatment as they cannot obtain in the cheaper private asylums, where the

clearly in which asylums the yearly repairs are included in the total cost of construction, and in which they are omitted. The quarter sessions of Warwickshire have made no return at all! In contrast, in the same Parliamentary paper, stand the clear tables and summary relating to the public asylums of Scotland. From the English return we can only gather an approximate estimate of the cost of construction, amount of land, salaries, cures, &c., no averages being given.

accommodation and comfort are absolutely below that of the county asylums, not to refer to the superior acquirements of the medical superintendents of the latter.

I do not feel called upon from this chair (nor does time admit) to enforce and illustrate the now incontestable superiority of public asylums, even in a financial point, for the curative treatment of the insane poor as contrasted with the private licensed houses, to which, before the Act of 1845, they were farmed out by their respective parishes. "Our present business is to affirm that poor lunatics ought to be maintained at the public charge. I entertain myself a very decided opinion that none of any class should be received for profit; but all I hope will agree that paupers, at any rate, should not be the objects of financial speculation." These words, spoken by Lord Shaftesbury in the House of Commons when he introduced the Lunacy Act of 1845 (the Magna Charta of the insane poor), settled this question once for all. Whose voice will speak similar words of comfort and healing to the insane of the upper and middle classes, and declare with authority which shall no longer be questioned, "that all insane captives whose freedom would not be dangerous should be liberated, and those who remain be surrounded with every safeguard of disinterestedness, humanity, and public responsibility"?

In here recording the success which has attended the Act of 1845—a success that led my friend Dr. Paget, in his Harveian Oration, to call the sight of one of our English county asylums "the most blessed manifestation of true civilisation that the world can present,"—I cannot refrain from adding a word of tribute to the memory of my revered friend John Conolly, whose work of freeing the insane from mechanical restraint, and of thereby founding our English school of psychological medicine, preceded the legislation promoted by the Earl of Shaftesbury, and ensured the success of these enactments.*

* In June, 1839, Dr. Conolly was appointed resident physician at Hanwell. In September he had abolished all mechanical restraints. The experiment was a trying one, for this great asylum contained 800 patients. But the experiment was successful; and continued experience proved incontestably that in a well-ordered asylum the use even of the strait-waistcoat might be entirely discarded. Dr. Conolly went further than this. He maintained that such restraints are in all cases positively injurious, that their use is utterly inconsistent with a good system of treatment; and that, on the contrary, the absence of all such restraints is naturally and necessarily associated with treatment such as that of lunatics ought to be, one which substitutes mental for bodily control, and is governed in all its details by the purpose of preventing mental excitement, or of soothing it before it bursts out into violence. He urged this with feeling and persuasive eloquence, and gave in proof of it the results of his own experiment at Hanwell. For, from the time that all mechanical restraints were abolished, the occurrence of frantic behaviour among the lunatics became less and less frequent. Thus did the experiments of Charlesworth and Conolly confirm the principles of treatment.

Dr. Conolly's four annual reports of the County Lunatic Asylum at Hanwell for 1839, '40, '41, '42, still form the groundwork of our treatment of the insane poor in the English county asylums, while these asylums themselves—whose fame, I may be permitted to say, based as it is on the successful application of the English non-restraint system, has gone forth into the whole civilised world, and brought rescue to the most suffering and degraded of our race—stand throughout this fair land imperishable monuments of the statesman to whom they owe their origin, and of the physician who asserted the great principle on which the treatment within their walls is founded.

"The system as now established," Dr. Conolly writes, "will form no unimportant chapter in the history of medicine in relation to disorders of the mind. It has been carried into practical effect in an intellectual and practical age, unostentatiously, gradually, and carefully, and is, I trust, destined to endure as long as science continues to be pursued with a love of truth and a regard for the welfare of man." *

We have made arrangements whereby you will have the opportunity of visiting and inspecting two of the best of the English county asylums, that for Sussex at Haywards Heath, and for Surrey at Brookwood; the State Asylum for Criminal Lunatics at Broadmoor, as also the four great metropolitan asylums, with a joint population of 6,600 lunatics, at Hanwell, Coluey Hatch, Banstead, and Wandsworth. There has since the Lunacy Act of 1845 been a steady increase in the number of pauper lunatics placed in the county asylums. In 1860 the proportion was 57 per cent., in 1870 it rose to 61 per cent., and in 1880 it was nearly 65 per cent. of their number. I think this continued increase is most injurious alike to the insane poor and to the due administration of the county asylums. The accumulation in such large numbers of harmless and incurable lunatics in these costly asylums is, moreover, a needless burden on the rates.

We may now, with an experience of thirty-five years, assert

inaugurated by Daquin and Pinel; and prove that the best guide to the treatment of lunatics is to be found in the dictates of an enlightened and refined benevolence. And so the progress of science, by way of experiment, has led men to rules of practice nearer and nearer to the teachings of Christianity. To my eyes a pauper lunatic asylum, such as may now be seen in our English counties, with its pleasant grounds, its airy and cleanly wards, its many comforts, and wise and kindly superintendence, provided for those whose lot it is to bear the double burden of poverty and mental derangement—I say this sight is to me the most blessed manifestation of true civilisation that the world can present."—*The Harveian Oration, 1866, by George E. Paget, M.D. Cantab., Regius Professor of Medicine in the University of Cambridge.*

* "The Treatment of the Insane without Mechanical Restraint," by John Conolly, M.D. Edin., D.C.L. London: Smith, Elder, & Co. 1856.

that the utmost limits within which the county asylum can benefit or is needed for the treatment of the insane poor is 50 per cent. of their number,* and that a further accumulation of lunatics there serves no practical purpose, and hence is an unjustifiable waste of public money. The workhouses contain 16,500 pauper lunatics, or 26 per cent. of their number. A recent statute facilitates the adaptation of wards in the county workhouses† for the reception of lunatics; and if these arrangements were properly carried out, I think another 14 per cent., or 40 per cent. of the incurable and harmless pauper lunatics and idiots, might be provided for in the workhouses. That this is no fancy estimate I may quote the parish of Brighton, long distinguished for its wise and liberal administration of the Poor-law, which has already 36 per cent. of its insane poor in the workhouse wards, and 55 per cent. only in the county asylum. The transfer of twenty chronic cases—no impossible feat—from Haywards Heath to the Brighton workhouse wards would at once bring the Brighton statistics up to my ideal standard for the distribution of pauper lunatics—viz., in county asylums, 50 per cent.; in workhouse wards, 40 per cent.; leaving 10 per cent. for care in private dwellings.

(b) *Lunatic Hospitals (Middle-class Public Asylums).*—Besides the county asylums for the insane poor we have in England fifteen lunatic hospitals, including the idiot asylums at Earlswood and Lancaster, where the principle of hospital treatment followed in the county asylums is applied to the insane of the upper and middle class with the most satisfactory results.

The following table gives a list of these asylums, with the

* There is a unanimous concurrence of opinion on the part of the Lunacy officials and the Visiting Justices, that the grant from the Consolidated Fund of 4s. a week made by Lord Beaconsfield's Government in 1874, for every pauper lunatic detained in the county asylums, has led to a needless increase in the admission there of aged lunatics and idiot children, who were and can with equal facility be kept in the workhouses. This grant has risen year by year, and in the estimates of 1881-82 is placed at £425,000. Instead of relieving the landed interest, as this ill-considered attempt to shift part of their burden on the fund-holders was intended, it has actually increased the county rate by the forced enlargements and extension of the county asylums. The editor of *The Times*, in 1874 and 1878, allowed me at some length to direct attention to this yearly increasing misdirection of the public funds. It is to be hoped that when the heavy local taxation of England is readjusted, this outlet of wasteful expenditure may not be overlooked.

† The success of the metropolitan district asylums at Leavesden, Caterham, and Darenth, which contain 4,470 chronic lunatics maintained at the rate of 7s. a week, shows how, even in so difficult a place as London, the treatment of chronic and harmless pauper lunatics in workhouse wards is to be accomplished, with a large saving to the ratepayers and a relief to the crowded wards of the county asylums, which are thus made available for the curative treatment of acute and recent cases.

date of their foundation, their present accommodation (number of beds), and their average weekly cost of maintenance.

TABLE IV.

The Registered Lunatic Hospitals (Middle-class Asylums) in England, with the Dates of their Foundation, the Number of Beds, and the Average Weekly Cost of Maintenance in 1880.

Name and Site of Asylum. (Registered Hospital.)	Date of Foundation	Number of Beds	Average Weekly Cost.*
Bethlem Royal Hospital ...	1400	300	1 11 7
St. Luke's Hospital ...	1751	200	0 19 3
York Lunatic Hospital ...	1777	160	1 1 1
Friends' Retreat, York ...	1792	150	1 12 6
Wonford House, Exeter ...	1801	100	1 11 0
Lincoln Lunatic Hospital ...	1820	60	1 8 2
Bethel Hospital, Norwich ...	1825	70	0 15 2
Warneford Asylum, Oxford ...	1826	70	1 2 7
St. Andrew's Hospital, Northampton ...	1836	300	1 10 1
Cheedle Asylum, Manchester ...	1849	180	2 2 0
The Coppice, Nottingham ...	1859	70	1 10 4
Coton Hill, Stafford ...	1854	150	1 12 10
Barnwood House, Gloucester ...	1860	110	1 14 3
Earlswood Idiot Asylum ...	1847	570	0 18 2
Albert Idiot Asylum, Lancaster ...	1864	350	0 14 0

These asylums have nearly 3,000 beds, and the average weekly cost of maintenance is £1. 10s., or, including the fabric account, £1. 15s.

There are 7,828 private lunatics registered in England, who are thus distributed :—

In registered hospitals	2702	or 36 per cent.	} In public asylums } 49 p. c.
In county asylums	484	or 6	
In state asylums	558	or 7	
In private asylums	3408	or 43	
In private dwellings	676	or 8	

The existing lunatic hospitals, or middle-class public asylums, thus already receive 36 per cent. of all the private patients. The advocates of this method of treatment of the insane, as opposed to the private asylum system, may now fairly say that by thus providing for the care and treatment of 36 per cent. of the private lunatics they have demonstrated the practicability of this method as applicable to the other 43 per cent. now in private asylums.

They can also appeal to the official statistics to show their

* The fabric charges are not included in these figures. Another 5s. a week must be added to complete this estimated weekly cost of maintenance.

superiority as regards results over the private asylums. In the last decennium, 1870-80, the average recoveries per cent. on the admissions in the registered hospitals was 46.84; in the metropolitan private asylums it was 30.5; and in the provincial private asylums 34.7. The mean annual mortality during the same period was in the registered hospitals 8.12; in the metropolitan private asylums it rose to 11.01; and in the provincial private asylums it was 8.81. They may, moreover, point to Scotland and say that while in England 49 per cent. of the private patients only are provided for in public asylums, 84 per cent. are so cared for in Scotland. What has been accomplished in Scotland may surely be done in England. And certainly, as their strong and final argument, they may challenge a comparison of these asylums, conducted at half the cost, with the best of the private asylums in England. We have made arrangements for your visiting Bethlem* and St. Luke's in London, and also the middle-class asylum, St. Andrew's Hospital, Northampton. I should very much like you to see St. Andrew's Hospital, which now contains 300 private patients of the upper and middle classes, from whose payments it derives a revenue of £40,000 a year, of which £10,000 was saved last year for further extensions. It would be difficult to over-praise the power of organisation which has enabled Mr. Bayley, the medical superintendent, to achieve this great result in the last ten years only. I can from frequent visitation speak of the order and comfort which reign throughout this asylum.

Mr. Dillwyn's Select Committee, in their Report (March 28, 1878), suggested "that legislative facilities should be afforded by enlargement of the powers of the magistrates or otherwise for the extension of the public asylum system for private patients," and in his Lunacy Law Amendment Bill, 1881, read a second time in May, Section 1 enables the justices to provide asylums for the separate use of private lunatics in like manner as the county pauper asylums were built. There can be no doubt, after the experience I have just related of St. Andrew's Hospital, Northampton, that, especially in the populous Home Counties, where no public provision for private lunatics exists, several such asylums, with 300 beds, might be built on the credit of the rates, and would in 30 years repay the capital and interest sunk out of the profits, and without, therefore, costing the ratepayers one penny. This clause alone would have made of Mr. Dillwyn's Bill a great gift to the insane of the upper and middle class.† I cannot

* In the *Journal of Mental Science* for July, 1876, there is a very interesting sketch of the History of Bethlem Hospital since 1400, by Dr. Hack Tuke.

† I brought this whole subject before the Brighton Medical Society in 1862, in a paper on *The want of a Middle-class Asylum in Sussex*, subsequently inserted in the *Journal of Mental Science* for January 1863.

but regret that so valuable a measure had to be withdrawn from want of time. It is already a well-worn complaint that home legislation is in England sadly impeded by the weary Irish agitation and debates.

Another method of providing public accommodation for private patients was laid by me before Mr. Dillwyn's Select Committee, in a *Memorandum on the Establishment of three State Asylums for Chancery Lunatics*, signed by Dr. Bucknill, Dr. Crichton Browne, and myself. The insane wards of the Court of Chancery pay upwards of £100,000 a year for care and treatment in private asylums. Certainly no loss could be incurred by the Treasury in advancing sums to build these asylums, where the yearly profits would, as at St. Andrew's Hospital, ensure the regular repayment of capital and interest. As the Court of Chancery controls in every detail the expenditure of the income of its insane wards, it is not an unreasonable demand to require that Court to provide fit public asylum accommodation, and such as the visitors deem necessary, for the Chancery patients now placed in private asylums, in the selection of which their official visitors have no voice, and over the conduct and management of which they exercise no control.

II. PRIVATE ASYLUMS.

There are 3,400, or 43 per cent., of the private patients in England confined in private asylums, of whom 1,850 or 54 per cent. are in the thirty-five metropolitan licensed houses which are under the sole control and direction of the Commissioners in Lunacy, who diligently visit them six times a year. The remaining 1,550, or 46 per cent., are in the sixty-one provincial licensed houses which are under the jurisdiction of the justices in quarter sessions, but are inspected twice a year by the Lunacy Commissioners. I cannot—even did I so desire—avoid, in an address like the present, stating to you my opinion of this method of treatment of the insane. The tenor of my remarks, when referring to the extension of the lunatic hospitals (middle-class asylums), has already shown the direction towards which my opinions and feelings tend. John Stuart Mill, the strenuous advocate of freedom of contract, nevertheless, in his *Political Economy*, in treating of this subject, observes that "insane persons should everywhere be regarded as proper objects of the care of the State," and, in quoting this authority, I must add, from long personal observation, my opinion that it would be for the interests of the insane of the upper and middle class to be treated as are the paupers in public asylums, where no questions

of self-interest can arise, and where the physician's remuneration is a fixed salary, and not the difference between the payments made by his patients for board and lodging and the sums he may expend on their maintenance. "Is there not," writes Dr. Maudsley, "sufficient reason to believe that proper medical supervision and proper medical treatment might be equally well if not better secured by dissociating the medical element entirely from all questions of profit and loss, and allowing it the unfettered exercise of its healing function? Eminent and accomplished physicians would then engage in this branch of practice who now avoid it because it involves so many disagreeable necessities."

Probably all not directly interested in this system, and many who, to their own regret, are so, will concur that, if the work had to be begun anew, the idea of licensed private asylums for the treatment of the insane of the upper and middle class would be, by every authority in the State, as definitely condemned as was in 1845 the practice of farming out the insane poor to lay speculators in lunacy. It is, however, a different matter dealing with an established system, and I am not of those who call for the suppression of all private asylums. The friends of many patients in England distinctly prefer them to public asylums, and some patients, who have had experience of both, contrast the personal consideration and study of their little wants which they receive in private asylums with the discipline and drill of the public institutions. I see no reason why private asylums should not continue to exist side by side with the public middle-class asylums. Time and competition will show which system shall ultimately gain the approval of the public. I am glad to find this opinion supported by Dr. Arthur Mitchell, Commissioner in Lunacy for Scotland, in his evidence before the Parliamentary Committee of 1877.

"I think," he said, "there should be no legislation tending to the suppression of private asylums. I would let the principles of free trade settle the matter. If the public have confidence in private asylums, and encourage them, I would let private asylums exist. I would give them no privileges, and would simply take care that the inspection and control over them are sufficient."

The verdict of public opinion in Scotland has been definitely against the private asylum system. While in England 43 per cent. of the private patients are confined in private asylums, the proportion in Scotland falls to 9.5.

If private asylums are to continue, there should be entire freedom of trade in the business. The Lunacy Commissioners have for many years placed endless impediments in the way of

licensing new and small asylums in the metropolitan district. I entirely differ from this policy, and I think that small asylums for four or six patients, licensed to medical men, would tend to lessen the existing evils of the larger private asylums. The monopoly which the Commissioners have established in the metropolitan district has certainly not raised the asylums there to a higher standard than those of the provinces, where free trade in lunacy prevails. I am tempted to say that it has had the contrary effect.

III. THE INSANE IN PRIVATE DWELLINGS.

Further reform in the treatment of the insane is not merely a question of whether and how they shall be detained in public or private asylums, but rather whether and when they should be placed in asylums at all, and when and how they shall be liberated from their imprisonment and restored to the freedom of private life. This is the reform in lunacy treatment which is beginning at last to take hold on the public mind in England, and has received a new impulse by the recent publication of an essay by Dr. Bucknill *On the Care of the Insane and their Legal Control.**

It is more than twenty years ago since the question of the needless sequestration of the insane was first raised in England by my friend Baron Jaromir Mundy, of Moravia. He spoke then to dull and heedless ears. I remember well I thought him an amiable enthusiast, and I said there was no fit or proper treatment for the insane to be found out of the walls of an asylum. I have since learnt a wiser experience. Well did he say, on leaving us, *arbores serit diligens agricola quarum fructus nunquam aspiciet.* I am very glad to have this opportunity of doing honour to the zeal and far-seeing wisdom of the first preacher of this new crusade; would he were here with us to-day to accept my formal adherence to his cause.

There is, I believe, for a large number of the incurable insane, a better lot in store than to drag on their weary days in asylum confinement :—

The staring eye glazed o'er with sapless days,
The slow mechanic pacings to and fro,
The set gray life and apathetic end.

In my evidence before Mr. Dillwyn's Select Committee in 1877 I was examined at some length on this question, and I stated that, but for my experience as Lord Chancellor's Visitor,

* Macmillan & Co., second edition. London, 1880.

and if I had not personally watched their cases, I could never have believed that patients who were such confirmed lunatics could be treated in private families in the way that Chancery lunatics are. I also said that one-third of the Chancery patients were already so treated out of asylums, and I added that I was of opinion that one-third of the present inmates of the private asylums might be placed in family treatment with safety. In support of this opinion I put in this table:—

TABLE V.

Showing the Proportion per cent. in Asylums and in Private Dwellings of the Chancery Lunatics and of the Private Patients (Lunatics not Paupers) under the Commissioners in Lunacy in England and Wales and in Scotland.

	PROPORTION PER CENT.	
	In Lunatic Asylums	Under Home Treatment in Private Dwellings
Chancery Lunatics	65·4	34·6
English Private Lunatics	94·1	5·9
Scotch Private Lunatics	93·8	6·1

This table deserves your attention. If 34·6 per cent. of the Chancery lunatics are successfully treated in private dwellings, while only 65·4 per cent. are in asylums, it is evident that of the private patients under the Lunacy Commissioners, of whom 94 per cent. are in asylums, some 30 per cent. are there needlessly, and hence wrongly confined. I see instances of such cases every visit I pay to the private asylums.

Another convert to his cause, made by Baron Mundy, is one of the distinguished vice-presidents of this section, Dr. Henry Maudsley, who, in 1867, in the first edition of his work on the *Physiology and Pathology of the Mind*, strenuously condemns the indiscriminate sequestration of the insane in asylums, observing:—"the principle which guides the present practice is, that an insane person, by the simple warrant of his insanity, should be shut up in an asylum, the exceptions being made of particular cases. This I hold to be an erroneous principle. The true principle to guide our practice should be this: that no one, sane or insane, should ever be entirely deprived of his liberty, unless for his own protection, or for the protection of society."

Dr. Maudsley (to strengthen his argument) pointed to the condition of the numerous Chancery patients in England who

are living in private houses. "I have," he writes, "the best authority for saying that their condition is eminently satisfactory, and such as it is impossible it could be in the best asylum," and he concluded an elaborate defence of this method of cure with this remark:—"I cannot but think that future progress in the improvement of the treatment of the insane lies in the direction of lessening the sequestration, and increasing the liberty of them. Many chronic insane, incurable and harmless, will be allowed to spend the remaining days of their sorrowful pilgrimage in private families, having the comforts of family life, and the priceless blessing of the utmost freedom that is compatible with their proper care."

In his recent essay on *The Care of the Insane*, Dr. Bucknill has a chapter entitled "Household Harmony"—

After many moody thoughts,
At last by notes of household harmony
They quite forgot their loss of liberty.

I give you therefrom his final and weighty conclusions in his own words:—"It is not merely the happy change which takes place in confirmed lunatics when they are judiciously removed from the dreary detention of the asylum into domestic life; it is the efficiency of the domestic treatment of lunacy during the whole course of the disease which constitutes its greatest value, and of this the author's fullest and latest experience has convinced him that the curative influences of asylums have been vastly overrated, and that those of isolated treatment in domestic care have been greatly undervalued."

What I have hitherto said under this section applies to the home treatment of private patients. The treatment of pauper lunatics in private dwellings is another part of this question, and in which important financial results are involved. The system takes its origin from Gheel, and has been adopted in Scotland with great success. No less than 14·7 per cent. of the insane poor in Scotland are placed in private dwellings, under the official inspection of the Lunacy Board. Dr. Arthur Mitchell's evidence before Mr. Dillwyn's Select Committee and the several annual reports of the Scotch Commissioners give details of this method of treatment, which my limits only allow me now to refer you to. Financially the cost of this treatment does not reach 1s. a day; in the county asylums (including the cost of the fabric) it is not less than 2s., a difference of 100 per cent. in expenditure.

With regard to England, 6,000 pauper lunatics, or 8·5 per cent. of their number, are registered as living with their relatives, or boarded in private dwellings, under the authority of

the boards of guardians, whose medical officers visit the patients every quarter, and make returns to the Visitors of the county asylums, to the Lunacy Commissioners, and to the Local Government Board. None of these authorities, however, take much notice of the returns, and little or nothing is known of the condition, care, or treatment of these 6,000 pauper lunatics. Any further amendment of the Lunacy Law should certainly, in some way, bring them within the cognisance and inspection of the Lunacy Commissioners, as is done in Scotland.

A successful effort further to extend this system in England is related by Dr. S. W. D. Williams, the Medical Superintendent of the Sussex County Asylum, Haywards Heath, in his evidence before Mr. Dillwyn's Select Committee, and also in a paper, *Our Overcrowded Lunatic Asylums*, published by him in the *Journal of Mental Science* for January 1872. My limits compel me to be satisfied with this brief reference to the important questions included in this third section of my address, "The Insane in Private Dwellings."

IV. THE ENGLISH LUNACY LAW.

Lastly, I would say a few words on the Lunacy Law of England, which, setting aside the special statutes, dating from King Edward II., regulating the proceedings in Chancery, are the result of the legislation of 1845, and consist chiefly of Acts amending other Acts. They form a large volume, which has been carefully edited by Mr. Fry.* A Bill for the general consolidation and amendment of these several statutes is an urgent need. The Government of Lord Beaconsfield announced, in Her Majesty's speech from the throne on the opening of Parliament in February 1880, that such a measure was in preparation; and although the political necessities of the Irish question have this year unfortunately absorbed all the energies and time of the Government, we have assurance, in the extreme solicitude which the Lord Chancellor on all occasions so markedly shows for the welfare of the insane, that the Government will be prepared to give the question of Lunacy Law Reform their early and careful attention. I am disposed to think that, previous to such legislation, a Royal Commission should be issued to investigate and report on the working in detail of the Lunacy Law, and to make suggestions for its consolidation and amendment.

* "The Lunacy Acts: containing the statutes relating to Private Lunatics, Pauper Lunatics, Criminal Lunatics, Commissioners of Lunacy, Public and Private Asylums, and the Commissioners in Lunacy; with an Introductory Commentary, &c." By Danby P. Fry, of Lincoln's Inn, Barrister-at-law. Second Edition, London, 1877.

It is exactly twenty-one years since a Parliamentary Committee reported to the House "*On the Operation of the Acts of Parliament and Regulations for the Care and Treatment of Lunatics and their Property.*" Many changes have passed over this department of medicine since the date of that report, and the temporary amendments of the Lunacy Law of 1845, which resulted therefrom, have almost served their purpose. The chief of these enactments "the Lunacy Acts Amendment Act 1862," passed the following year, and embodied the various suggestions of the Lunacy Commissioners, based on their experience of the working of the Act of 1845, and from an official point of view was a valuable contribution to the Lunacy Law, but it failed to give effect to many of the recommendations of the Select Committee of 1860. In the same year passed "the Lunacy Regulation Act 1862," which led to considerable amendment of the proceedings in Chancery. The important requisite, however, of a cheap and speedy method of placing the property of lunatics under the guardianship of the Lord Chancellor has yet to be attained. One of the most experienced officials in Chancery, Master Barlow, in his evidence before Mr. Dillwyn's Committee, in 1877, said:—"I am a great advocate for a great reform in Lunacy (Chancery) proceedings; I would facilitate the business of the procedure in the office, and shorten it in such a way as to reduce the costs."

After the evidence given by Dr. Arthur Mitchell before Mr. Dillwyn's Select Committee of 1877, it is evident that in the consolidation and amendment of the English Lunacy Laws, the Scottish Lunacy Law and practice must be carefully considered. It is in Scotland alone that the whole lunacy of the kingdom is under the control and cognisance of the Lunacy Board.*

Again, the relation of the Lunacy Commissioners to the county asylums under the County Financial Boards (whose advent is nigh at hand) is a difficult question, the final solution of which will influence for good or evil the future of these asylums. Herein also falls the question I have before referred to, of the annual Parliamentary grant for pauper lunatics maintained in asylums, and reaching now to half a million a year. Is the central government to check, through the distribution of this grant, the county boards; or are they to retain the same authority over the county asylums as is now exercised by the justices in quarter sessions? The whole

* I may be pardoned, if I venture here to refer to the annual reports of the Commissioners in Lunacy for Scotland, as containing an amount of well-digested statistical information regarding the lunacy of the kingdom, which we search for in vain elsewhere.

future efficiency of the English county asylums depends upon the right adjustment of the relative control given to the local authorities through the new county boards, and to the central government through the Commissioners in Lunacy.

There is also for consideration, as in contrast with the Lunacy Laws of Scotland, the divided jurisdiction of the Local Government Board and the Commissioners in Lunacy over pauper lunatics in workhouses, of whom 17,000, or 26 per cent. of their number, are there and in the metropolitan district asylums under the control of the Local Government Board with the merest shadow of inspection by the Lunacy Commissioners. Again, to what extent is the credit of the rate-payers to be used in the establishment of public asylums for private patients? I have already said how much I desire to see the public asylum system, as now existing in the registered lunatic hospitals, extended, more particularly in the Home Counties, by this method. Then the wide question of official asylum inspection. Is the present amount of it enough, and the method of it sufficient for the needs and protection of the insane, or does the Lunacy Commission require both extension and remodelling?

These are but a few examples of the difficulties besetting the question before us of the consolidation and amendment of the English Lunacy Law, and which lead me to the opinion that the whole subject, now ripe for solution, requires skilful and scientific sifting by a Royal Commission, previous to any consolidating and amending Act being laid before Parliament. I am glad to have this occasion to express my personal confidence in the ability, industry, and integrity with which the existing Lunacy Law is administered by the Commissioners. If I were disposed to criticise their policy, I might say that they trust too much to their one remedial agent, the extension of the county asylums, for meeting all the requirements and exigencies of the insane poor, while as regards the private asylums, with 54 per cent. of the private asylum population under their sole control in the metropolitan district, that they have from the first, since 1845, been content to enforce the remedying of immediate shortcomings, rather than endeavoured to place before the proprietors any standard of excellence to which they shall attain.

In concluding my remarks on the last section of my subject—the Lunacy Law of England—I would say that no mere amending Act like that of 1862, embodying simply the further suggestions of the Lunacy Commissioners, will satisfy the requirements of the medical profession or of the public. In the evidence taken before Mr. Dillwyn's Select Committee in 1877

will be found many suggestions for the further amendment of the Lunacy Law of an important character, one or two of which Mr. Dillwyn embodied in his Lunacy Law Amendment Bill of this year, which, as I have already said, has been withdrawn. It is impossible for any private member of Parliament, actuated though he be by an earnest desire to remedy grave evils, to deal with so wide and complicated a question as the consolidation and amendment of the English Lunacy Law. No one is more fully aware of this impossibility than is Mr. Dillwyn, and no member of the House is prepared more heartily to support the Government in passing a wide and comprehensive measure of Lunacy Law Reform.

I fear, gentlemen, that I have exceeded the limits of an opening address. Yet the wide subject which I selected—Lunacy in England (*England's Irren-Wesen*)—did not admit of shorter treatment or of further compression. It is, after all, but a bare outline that I have to-day been able to sketch, of the present condition of the insane in England and the manner and method of their care and treatment. I may claim to have endeavoured to give you a truthful picture of our present state, and I certainly have not desired to hide our many shortcomings from you. Indeed, my object in selecting this subject for my address, is the hope, that the position I fill to-day in this great International Medical Congress, may gain for my ideas on lunacy reform, which I have thus brought before this section, a practical recognition such as I could not, under other circumstances, expect my humble opinions to command. If such a result should follow, I truly believe that the use I have made of this great opportunity, may be the means of extending to the insane of all classes in England that further measure of protection and liberty, which the experience of the past working in the County Asylums of the Lunacy Act of 1845, on the lines of the non-restraint system, has now shown to be alike practicable and safe.

ART. III.—A PSYCHOLOGICAL STUDY OF SHAKESPEARE.

By R. H. SEMPLE, M.D., F.R.C.P.L.

IN order to prevent all misunderstanding as to the meaning here attached to the above title, I must observe that I employ in the present article the word "psychological" in its primary signification as derived from the Greek word $\psi v \chi \eta$, variously rendered in English as "breath," or "life," or "spirit," and used in defining the mental qualities of human nature as contradistinguished from its physical or corporeal features. "Psychology" has in recent years been sometimes erroneously supposed to refer only to morbid conditions of the mind; but these should properly be represented as belonging to *pathological* psychology, while the healthy or normal operations of the thinking principle would be properly included under the category of *physiological* psychology.

It is the more necessary thus to define the sense in which the title is given as above, because, in venturing to offer any opinions on the genius of Shakespeare, it cannot be too emphatically stated that the great poet and dramatist seems to have been himself entirely free from anything approaching to mental alienation—a condition, alas! unfortunately too common with those on whom the brilliant but dangerous gift of genius has been bestowed. Far from displaying any of those eccentricities of conduct or behaviour which have marked the career of many other gifted human beings, Shakespeare seems, from the rather scanty records of his life which have reached the present age, to have been a remarkably prudent, consistent, honourable, and conscientious man. He married very early a lady some few years his senior, and to whom he was deeply attached, and by whom he soon had a family. He chose as his professional sphere the fourfold domain of poet, actor, theatrical manager, and dramatic author, and he is known to have acted in several of his own pieces, but chiefly in rather subordinate parts, as the Ghost in "Hamlet" and Adam in "As You Like It." He was a genial companion, as is shown by the testimony of his contemporary, Ben Jonson, and fond of the amusements of London, but equally delighted with the rural beauties and the seclusion of the country, whither he often gladly returned, and where he purchased property. His biographers state that he retired from London at 48 years of age, and fixed his permanent

residence at Stratford-upon-Avon, and died at the age of 52. What a period of intellectual activity was thus embraced by this extraordinary man within a few short years of human life! What a profusion of characters, of sentiments, of reflexions, of descriptions, emanated from his prolific pen! The minds of ordinary mortals are bewildered in attempting to grasp the idea of so much wisdom, so much invention, so much insight into all the mysteries of man's existence, being crowded into so narrow a space of time, especially amidst the ordinary pursuits and amusements of common life, and the necessary labours involved in the maintenance of a family and in the provision of a moderate competence for support in advancing years.

In choosing as a title for this paper, "A Psychological Study of Shakespeare," my object is to offer a few remarks on the influences which seem to have acted on the great poet's mind in the production of his immortal works; and while professing myself utterly unable to explain the source of those flashes of genius which turned into precious ore and into polished shape the crude materials presented to his senses, it is not presumptuous, I think, to inquire how far external circumstances may have operated in moulding into being those imaginary forms which now strike the reader as living and speaking pictures, presenting themselves as true representations of all that is characteristic of human nature in all its aspects.

It would be an idle task to compare Shakespeare with any of his predecessors or contemporaries in the realms of poetry or the drama, and for the best of all reasons, namely, that he is incomparable. As for the British drama, it can hardly be said to have been in existence before his time; and if the Greek and Roman dramatists be consulted, it will be found that, great and noble as are the dramatic compositions of Æschylus, Sophocles, and Euripides, and fanciful and amusing as are those of Menander, Aristophanes, Plautus, and Terence, yet Shakespeare excels them all, individually and collectively, both in expressing the grand, the pathetic, and the sublime, and in delineating those lighter phases of human character and conduct which meet the observer of the manners of ordinary life.

Before the time of Shakespeare the theatrical exhibitions of England seem to have consisted chiefly of those "Mysteries" or "Morallities," as they were called, in which religious subjects were represented before the multitude, or of "Masques" in which royalty sometimes indulged, and which consisted of a mixture of verses, music, pageantry and revelling. It is stated by Malone in his "Historical Account of the Rise and Progress of the English Stage" that there were in his time only thirty-eight plays extant, which were written before, or in, the year

1592, when Shakespeare is believed to have commenced his career as a dramatic author. The names of these plays and the dates of their production are given by Malone, and few and contemptible as they are, according to that writer, they were the most popular dramatic compositions of the time and the best that had been previously exhibited. The poverty of dramatic literature at this period shows in yet stronger light the brilliancy of Shakespeare's genius, because it is thus evident that having no models to imitate, no standards of dramatic taste to serve as guides, he himself became the model for future imitation and the standard of excellence for all posterity.

In connexion with this subject, it cannot be too distinctly stated, that not only did Shakespeare become the regenerator and reformer, and indeed the founder, of the English drama, but he was also one of the chief reformers of the English language, which, in the time of Elizabeth, was emerging from the confusion in which it had been involved during previous periods. With a foundation of Anglo-Saxon, the English language had been enriched, after the Norman Conquest, by a multitude of French words, and of Latin words through the French or Norman ; but, during the Civil Wars of the Roses, the cultivation of literature had been necessarily neglected, and the language, both written and spoken, had fallen into an irregular and chaotic state. But in the time of Henry VIII., Edward VI., Mary, and Elizabeth, the Greek and Latin languages had been extensively cultivated by the upper classes of society, and words were introduced directly from those tongues instead of being corrupted by their transmission through the French. The consequence was that the English language now began to be subject to fixed rules and to assume a definite construction, but the spelling was still capricious and arbitrary, and forms of speech, at the present day obsolete, were still retained. Of all those who established the English language in the Elizabethan age, Shakespeare was the foremost, and although it would be doing injustice to many of his contemporaries to pronounce him to be the only reformer in this respect, yet it must be observed that Spenser and Ben Jonson and others of his contemporaries, learned and distinguished as they were, contributed nothing whatever to the grace and elegance of the literary style of Shakespeare, who was their superior and their guide rather than their imitator. Shakespeare, indeed, was alone in his skilful management of our tongue ; and although it must be admitted that he was probably not acquainted with the poetical rules adopted or invented by the classical writers, yet he possessed a native taste of his own which enabled him to arrange his words in the most harmonious order, and made his verses so smooth

and mellifluous that, if written in the present day, they would not only defy criticism but extort admiration.

How Shakespeare, with his imperfect education, was able at once from his youth to write beautiful poetry, is one of those mysteries which psychological science is powerless to penetrate. The only explanation is that his well-organised mind saw intuitively the graceful forms which our language is capable of assuming, and that he wrought and wielded it at his pleasure, just as the sculptor extracts from the rude and massive block the lines and surfaces which cause the marble to breathe and live. English poetry in the time of his predecessors was in a most rough and uncouth condition ; and, although the versification of Chaucer is not so difficult of reading as is generally supposed, yet it is fragmentary and unpolished for the most part, being made up of a mixture of Anglo-Saxon and Norman and classical roots not well blended together. It was Shakespeare who fused all the discordant elements into uniformity, and, with the potent crucible of his genius, converted them into the pure golden streams which flow so brightly and so smoothly in his poems and his plays, and constitute standards of excellence for the imitation of all ages.

Although the inquiry has been often instituted, it is not unprofitable once more to trace the influence which education may have exerted on the development of Shakespeare's genius ; but the investigation is a somewhat unsatisfactory one. The records of his early youth give little information beyond the fact that he was educated at a grammar school in his native town, and probably began his studies, such as they were at this period, when he was about seven years old, and probably continued them till he was fifteen. The supposition that from the latter period until he was eighteen he spent his time at the University of Oxford or at that of Cambridge appears to be quite destitute of foundation, and it is equally unproved that he was during the same period a student of one of the Inns of Court. But there is some evidence that during the years in question he was on rather intimate terms with a lawyer's clerk at Stratford-upon-Avon, from whom he probably picked up some of that legal knowledge and became acquainted with much of the legal phraseology which he exhibits in many of his plays. Indeed, from the universality of his acquirements, and from his singular power of putting appropriate language into the mouths of all his characters, it might be asserted, upon internal evidence, that he was educated as a doctor of medicine, or as a lawyer, or as a soldier, or as a sailor ; but I think the most probable supposition is that he had no regular training in any of these pursuits, and that, having had only a moderate education in

ordinary subjects, he applied his gigantic mind to perusing the literature current in his time, and from this kind of laborious but desultory reading, combined with an acute observation of the human characters falling under his notice, and of the natural objects submitted to his senses, he evolved from his fertile brain those wonderful productions which have astonished and edified mankind.

Notwithstanding all that some writers have suggested to the contrary, I cannot agree that Shakespeare was what might be called a learned man, or that he was regularly disciplined in any consecutive course of study either in literature or science. It is true that classical allusions very frequently occur in his writings, and that he often uses English words in the happiest manner, and in accordance with their etymological meaning; but there are too many obvious mistakes made by him in the quantity of proper names of Greek or Roman origin, and too much confusion in matters relating to ancient history, to allow of the supposition that he was a profound, or even a moderate, Greek or Latin scholar. It must be remembered, however, that he did not live in a rude period of English history, but in an age when learning was becoming more and more largely cultivated, and when, by the influence of the art of printing, the facts described and the theories invented by ancient and modern writers were diffused over the community, the example of devotion to literature being set by the highest in the land, and being followed, more or less, by the classes below them. There was, in fact, almost a rage for the cultivation of classical literature, and translations were made of many of the most distinguished writers of antiquity, and of many of the more modern poets and romance-writers of France and Italy. In particular, the histories of Plutarch were thus made known to English readers in the time of Elizabeth; and the poems of Homer and Virgil were likewise made available by means of translations, however imperfect those versions may appear in our own time; and the writings of Ovid, and especially the *Metamorphoses*, were eagerly read in their English dress. Besides these, there were a multitude of stories and legends derived from French, Italian, and perhaps Spanish sources, which were among the popular writings of the day. Of all these channels of information Shakespeare was evidently aware, and he certainly eagerly availed himself of the fascinating stories of the poets, and the hardly less fascinating records of the historians. But, familiar as Shakespeare certainly was with the fables of Homer, Virgil, and Ovid, and with the biographies by Plutarch, though in all probability only through the medium of translations, I can find no evidence in his works that he was well acquainted with Horace or Terence or Cicero, or still less that

he was familiar with the Greek tragedians, or the Greek comic writers, or with the Greek orators.

On the other hand, however, he must have devoured with avidity all the translations existing in his time, whether from Greek, Latin, Italian, Spanish, or French originals, as well as the works of his own predecessors, especially Chaucer, and from these heterogeneous materials he has developed, under the magic touch of genius, those inimitable creations in attempting to characterise which the language of eulogy is utterly poor in expression.

The industry of some of Shakespeare's commentators, especially Malone and Steevens, has succeeded in making out a list of the ancient translations from classic authors, which the great dramatist might have seen, and some of which he certainly saw, in the course of his extensive though discursive reading. The dates of these translations are given by the commentators, who show that many of them were printed before Shakespeare began his career as a dramatist. Among these are some of the books of Homer's Iliad, ten of them being translated into English from the French, a play of Euripides, some books of Herodotus and Thucydides, several editions of Plutarch's Lives, the Ethics of Aristotle, some of the books of Xenophon, the Aphorisms of Hippocrates and Galen's two Books of Elements, a great number of versions of Virgil's works, in prose, in Scottish metre, in rhyme, in blank verse, and in English hexameters, only two books of Horace together with his Art of Poetry, the Epistles and the Satires, a great number of Ovid's works, including the Metamorphoses, the Epistolæ Heroidum, the Elegies, the Remedium Amoris, the De Tristibus, the Mencœchmi of Plautus, some plays of Terence and Seneca, and several books and Epistles of Cicero.

That Shakespeare was acquainted with Homer, and with the history of the Trojan War, and with the individuals who play so conspicuous a part in the immortal poems of the Iliad and the Odyssey, is beyond all doubt; but it is almost demonstrable that he was conversant with them only through the medium of the translations existing in his day. At the same time it must be admitted that he displays his extraordinary powers in seizing upon the peculiarities of each of the characters and putting into their mouths the very same kind of language and the same sentiments which were invented by Homer. The play in which his knowledge of the great Greek poet is most conspicuous is "Troilus and Cressida," a very poor production, although undoubtedly emanating from his pen. In this piece, the main plot and some of the incidents, which are in very questionable taste, are derived from a poem of Chaucer's,

while what may be called the subordinate characters, who fill up the scene, are the illustrious warriors and heroes and heroines of the *Iliad*, and the place of the action is Troy and the Grecian camp before it. Besides the principal characters Troilus and Cressida, and Pandarus the uncle of the latter, a whole multitude of Greek and Trojan worthies are introduced upon the stage, namely Priam, King of Troy, and five of his sons including Hector and Paris; *Æneas*, the hero of the *Æneid*; Agamemnon, the General of the Grecian host, and his brother Menelaus; Achilles, Ajax, Ulysses, Nestor, Diomedes, and Patroclus, the Greek commanders: Thersites, the scurrilous and deformed vituperator; Helen, the fatal cause of the war; Andromache, the noble wife of Hector; and Cassandra, the prophetess. Now, as I have just observed, there is very appropriate language put into the mouths of all these characters; Agamemnon is royal, Achilles is fierce, Hector is magnanimous and brave, Ulysses is cautious, Nestor is sagacious, Thersites is abusive, Andromache is tender, Helen is weak and childish, and so on of the rest; but I cannot believe that a poet could be well acquainted with the original language and the sublime descriptions of Homer who could huddle all these characters upon the stage merely in order to form a group of figures to fill up a picture, the prominent objects of which are an ordinary pair of lovers, together with the lady's uncle, who plays a kind of comic part, and who is of such immoral tendencies and occupation that his very name has become familiar in the English language as a type of the most degraded and disgusting phase of vice. Let us contemplate Pandarus commencing the play, together with Troilus, and concluding it in a kind of humorous epilogue addressed to the lowest and basest class of frequenters of a theatre, and I confess that, notwithstanding my profound reverence for Shakespeare's genius, I think that Homer's heroes are degraded by the association, and that the writer who could so associate them in the same play could never have been duly impressed with the pure and lofty conceptions of the old Greek poet.

Here it may be not inappropriate to observe that, making allowance for errors like that above noticed, the influence of education, valuable as it is, may sometimes tend to cripple the efforts of genius rather than to develop them; and it is not unreasonable to suppose that, if Shakespeare had been constrained to submit himself to a long course of academical discipline, the result might have been the loss to the world of some of his most brilliant productions, which derive much of their charm from the unbounded licence they display, their freedom from all conventional rules, and their wonderful originality. He might have been an accurate Greek or Latin scholar;

he might have composed faultless Latin or Greek hexameters and pentameters; he might have written Greek choruses, or imitated the lyrics of Pindar or Horace: but what would have become of Macbeth, Othello, Lear, Falstaff, Prospero, Caliban, and a host of other creations, which, in their entire originality, are unsurpassed and unequalled in the whole range of ancient or modern literature?

If, again, Shakespeare had been trammeled with a regard for what are called the unities in dramatic composition, what a world of fancy would have been withheld from mankind! Unlike his great Greek and Roman predecessors, whose theatrical scenery was composed of the mountains and the sky and the foliage of the neighbouring trees, or at most represented only the exterior or interior of some temple, or palace, or dwelling-house, and whose notions of time and place limited them to a very short duration of the former and to a fixed position of the latter, his great mind, disdaining the boundaries of time and space, and of earth itself, was, to use his own words, "of imagination all compact," and

Glanced from heaven to earth, from earth to heaven;
or, to use the words of Johnson, he

Exhausted worlds and then imagined new;
Existence saw him spurn her bounded reign,
And panting Time toiled after him in vain.

If he had dramatised the great fables of antiquity in the time of Æschylus and his successors and contemporaries, he would not have been satisfied, for instance, to represent Prometheus chained to a rock of Mount Caucasus, uttering his complaints to the sea, the air, and the mountains, and receiving the compassionate addresses of the ocean nymphs or the sympathy of earthly or unearthly visitors, but he would have carried us into the depths of Tartarus, or to the heights of Olympus, would have revealed to us the councils of the Gods or the decrees of the Fates, or, what is more, he would probably, representing what often occurs in real life, have introduced some coarse or vulgar character upon the scene to relieve or throw into deeper shade the ghastly horror of the scene, and to vary the monotonous complaints uttered by the presumptuous mortal who stole the fire from heaven, and whose liver was being devoured by the rapacious vulture.

Descending for a moment from these speculations, and tracing, however feebly, the influence of external agencies on the psychological development of Shakespeare, it is especially worthy of notice that he was married at eighteen, that his first child was born within a year of his marriage, and that twins, boy and girl, followed in little more than a year afterwards. These par-

ticulars, trivial as they might be in the life of an ordinary mortal, must be considered as very important in moulding the character, directing the pursuits, and determining the course of life of such a man as Shakespeare. In contracting such an early alliance, and being so soon involved in the cares of a family, he must have been necessarily interrupted in a systematic course of study or professional pursuit, if he ever entered upon any; and, in the absence of definite information on the subject, it is fair to assume that he spent his time in extensive though desultory reading, and in observing men and things such as he saw around him. That he was an ardent admirer of nature and of natural productions is evident from innumerable passages in his writings; and that he also made himself acquainted, as far as his opportunities extended, with pictures and statues and other works of art is equally manifest from intrinsic proofs. But being, as he no doubt was, a man of strict integrity and prudence, as well as of great industry, he must have begun to feel that as his family, though highly respectable, was by no means rich, it was necessary for him to look around for some means of living. Circumstances, which may be regarded as accidental, threw him in the way of some players who happened to be performing at Stratford, and hence he seems to have derived his love of the stage and his determination to adopt the theatrical profession as a means of subsistence.

Regarded in a psychological light the early marriage of Shakespeare was attended by the most happy results, not only as regarded his own worldly prosperity, but also the intellectual light with which he was able to irradiate his country and the whole world. Such a union of a boy of eighteen with Anne Hathaway, must have been looked upon, considering the circumstances of their respective families, as a most imprudent step, and likely to lead only to poverty and unhappiness; but in the case of Shakespeare the alliance was in every respect fortunate and auspicious. His novel position as a young man, under twenty, finding himself already the father of three children, appears to have stimulated him to turn his education, such as it was, and his desultory reading, to material profit for the support of his family; and although it is doubtful whether he gained his living at this period as an actor or as a dramatist, there can be no question that he was making himself acquainted with theatrical life, and with the mechanical and conventional requirements of the stage, which became of so much use to him in his subsequent career.

In the character of the lady, also, who became his wife and who survived him, he must have found a congenial and loving

partner; and although her history is very little known, and although he makes no mention of her in his writings, yet her virtue and her constancy, and, perhaps, her patient endurance of privations in their early married life, would have made a deep impression on the mind of the youthful husband, and no doubt laid the foundation of those exquisite portraiture of female characters which constitute some of the principal charms of his writings, and have attracted the admiration of all cultivated minds. It is universally admitted that, notwithstanding the licentious habits and sentiments of the times in which he lived, Shakespeare's female characters are generally models of purity and virtue, and it is only necessary to allude to such creations as Desdemona, Imogen, Miranda, Hermione, in proof of this position. It is true that all these and other of his female characters are not cast in the same mould, or the result would have been the tameness and insipidity which are traced in the works of most authors who have attempted to delineate the attributes of woman. As occurs in real life, the female characters of Shakespeare exhibit great variety, and the virtues of his unmarried and his married heroines although of course of a different stamp, are equally conspicuous; the devotion and the unmerited sufferings of Hermione, the ardent and impetuous love of Juliet, the perfect innocence of Miranda and Desdemona, the playfulness of Rosalind and Beatrice, being beautifully contrasted, and painted with the skill of the most accomplished artist in female portraiture.

That Shakespeare himself had the utmost reverence for female purity and virtue is evident in all his writings; and although undoubtedly he has, according to the manners of his time, indulged very often in a warmth of expression which would be unsuitable to the present age, he has always drawn a broad distinction between the pure and ideal love, which is founded upon esteem and affection, and that material development of the passion which is common to man and the brute creation. In the "Sonnets," in "Lucrece," and even in the very beautiful though amorous poem of "Venus and Adonis," there are abundant illustrations of the above remarks; as, for instance, where, in the last-named work, the youthful and really virtuous huntsman declares, in answer to the impassioned addresses of the Paphian Queen:

Love comforteth like sunshine after rain,
But Lust's effect is tempest after sun;
Love's gentle spring does always fresh remain,
Lust's winter comes ere summer half be done:
 Love surfeits not, Lust like a glutton dies;
 Love is all truth, Lust full of forged lies.

The marriage, then, of Shakespeare, although only in his

eighteenth year, was unquestionably a great cause, if not the chief cause, of the development of his marvellous intellectual qualities. The copious well of his imagination required only some power to draw up its overflowing waters, wherewith to irrigate the barren fields of dramatic literature in the sixteenth century, and the necessity of obtaining a livelihood was the engine which evolved the latent streams.

Full many a gem of purest ray serene
The dark unfathomed caves of ocean bear;

and the pure gem of Shakespeare's genius, which might have remained concealed had not circumstances revealed its beauty and its brilliancy, was rescued from obscurity by his marriage with Anne Hathaway and his meeting with strolling players at Stratford-upon-Avon.

To a mind like Shakespeare's, looking at this period of his life in a psychological point of view, it is quite conceivable that not only the easy and jovial manners of the actors presented great and irresistible attractions, but that the very poor condition of dramatic literature in his time fired his ambition to produce something better than the trash then deemed good enough to be presented to the public. No authentic particulars have been handed down as to the manner in which he spent his time from the age of twenty-one to twenty-five, which must have been in him a period of the greatest intellectual activity, in which he was no doubt occupied either in writing plays himself or in adapting and improving the works of his predecessors or contemporaries. But from internal evidence it is plain that the representations of the stage, crude and coarse as they were in his youth, inspired him with many of those lofty thoughts which breathe and burn throughout his writings, and which, deriving their source from a microcosm seen in actual life, expanded into those boundless regions of thought and invention in which time and space are annihilated, and in which man and nature are depicted in all their multitudinous aspects, in beauty and deformity, in light and in darkness, in gaiety and in despair, in sunshine and in storm, in space and in infinity, in time and in eternity. "All the world's a stage," as he beautifully expresses it,—

And all the men and women merely players ;
They have their exits and their entrances,
And each man in his turn plays many parts ;

and, again, when Macbeth, at length weary of life and deserted by his friends, exclaims :

Life's a mere shadow, a poor player
That struts and frets his hour upon the stage,
And then is heard no more.

How well can we understand that the representations on the stage (sometimes probably in a barn) at Stratford-upon-Avon inspired Shakespeare's mind with the grandeur and at the same time the weakness and vanity of human things! The actors repeating high-flown and bombastic lines, attired as kings or heroes, putting off for a time their ordinary dresses, and attired in glittering but tawdry colours, and again resuming their shabby habiliments, would readily convey to his mind a picture of the changeful condition of mankind in actual life; while the stage, glowing with artificial light and scenery, or perhaps only tenanted for a time by walking puppets, terminating their brief career of a few hours to sink into darkness and silence, would be to him a type of life and death, not only in man, but in the great scheme of Nature herself, and would shadow forth the beauties of creation, the monuments of art, the symmetry of the universe, as the things of an hour, and perishable as the scenery of a stage-play!

These our actors,
As I foretold you, were all spirits, and
Are melted into air, into thin air;
And, like the baseless fabric of this vision,
The cloud-capped towers, the gorgeous palaces,
The solemn temples, the great globe itself,
Yea, all which it inherit, shall dissolve,
And, like this insubstantial pageant faded,
Leave not a rack behind.

A fertile subject of discussion among metaphysicians once was whether there exist in the human mind certain innate ideas which grow and expand simultaneously with the growth and development of the bodily organs, or whether the mind is originally a mere blank, a *tabula rasa*, like a sheet of white paper, and receiving impressions from external objects by the agency of the senses. Without entering into the metaphysical examination of the question, it is perhaps allowable to suppose that the conflicting theories on this subject may be reconciled by admitting that both views are to some extent consistent with what is observed in human nature. On the one hand, it is useless to argue that, if a human being were absolutely excluded from all external influences—for instance, if he were deprived of light, and isolated from all objects which are capable of conveying sensations—his mind could develop itself so as to conceive and communicate ideas. On the other hand, it is equally absurd and irrational to suppose that any external influences whatever could inspire ideas where no capability of forming those ideas existed. Hence it is evident that what is called education is like the seed thrown into the soil, which, if congenial, will expand and nourish the embryo till it attains maturity, but which, if barren or unsuitable, will arrest its

progress, impair its vitality, and cause it to wither and decay. Thus, taking the average of human minds, they clearly contain within them a certain power of apprehension and conception which, seizing upon visible or tangible images, or receiving sounds or odours, or affected by mental impressions, converts all these materials into ideas which become communicable to other living beings by the organs of expression.

But how different is this power, which, in a certain sense, is innate in the human soul, in different ranks and conditions of existence! Take a school of a hundred boys or girls, and give them the same advantages of mental culture, and how different will be the result! Much of this diversity may be, of course, accounted for by accidental circumstances; but, when all allowances are made, it is obvious that in some of the minds there is a quickness in receiving and retaining knowledge, and in expressing ideas, which is wanting in many of the others; and hence, notwithstanding the most elaborate efforts on the part of teachers, some human minds will remain undeveloped, or only partially developed, during life, while others will, and in many cases quite unexpectedly, astonish their friends or the world at large by the extent of their accomplishments, the brilliancy of their imagination, and their ascendancy over their fellow-mortals. Again, admitting the beneficial influence of education (using the word in its common acceptation), how many men, and women too, have become distinguished without any ordinary education at all! In such cases—and they are very numerous—the mere scholastic routine has been unnecessary; poets have composed the most pathetic lines who have never studied the rules of versification; orators have swayed the minds of multitudes although they were unskilled in the language of Cicero or of Demosthenes; musicians have charmed the ear with melodious cadences before they were acquainted with the principles of harmony; painters with boyish fingers have drawn graceful figures before they learned the fundamental rules of art; and even mathematicians have solved some of the most intricate problems without having been previously tutored in Algebra or in the books of Euclid. In all such instances the native forces existed in the mind, and although education may serve still further to develop the innate germs of thought and imagination, and to systematise and arrange the scattered elements of mental power, yet, without that subtle metamorphic essence usually called genius, external influences would effect little or nothing beyond the ordinary result of developing what is commonly known as "talent," which differs as much from genius as the Highgate and Hampstead hills differ from the chain of the Alps or the Andes, or as the fountains of Versailles from the cataracts of Niagara.

Pursuing, although with a rapid glance, the career of Shakespeare, and tracing, with however imperfect materials, the influence which external circumstances and objects exerted on his psychological development, we find that at the age of 25 he repaired to London to seek his fortune as an actor and a dramatist, and became a partner in the theatre then situated at Blackfriars. Engaged in this new sphere of activity, and exchanging the limited society and the rural scenes of a country town for the intellectual assemblies and the crowded streets of a metropolitan city, he must have found abundant scope for that acute and accurate observation of mankind which his writings everywhere display, while, at the same time, the teeming literature of the period, then becoming enriched not only with original works but with translations from ancient and modern languages, must have supplied him with copious materials for the expansion of his rich imagination and his fertile fancy. His responsibilities as a theatrical manager no doubt compelled him to consult the popular taste in the composition and production of his plays, and hence, I think, may have arisen many of those blemishes which some of them certainly exhibit. The coarse and vulgar language put into the mouths of many of his *clowns* (for so he calls them) are attributable to much the same causes as those which influence managers in the present day, such as the desire to achieve popularity even at the expense of good taste; and the grossness of a few of his plots, so different from the chasteness of the majority of his productions, must be attributed to the same motive. But looking at the results, I can easily conceive how, in the composition of his plays, while weaving out plots and incidents likely to seize the fancy of the multitude, sudden flashes of inspiration illuminated his mind and were transferred to his paper—gleams of splendour which he probably did not foresee when he took up his pen, and which burst upon himself with the force of a revelation.

It is quite admitted, and the remark implies no reproach, that none of his plots are original, but are founded on various tales, romances, or histories which fell in his way, but which he embellished or amplified with the richest fancy, the most charming descriptions of scenery and of natural objects, and the most astonishing inventions of human character. Where he obtained some of his special knowledge of localities and pursuits—as, for instance, of the sea and of sea-faring life—it is difficult to discover, and although his delineations of rural scenes and employments, in which he evidently delighted, were derived from the reminiscences of his birthplace and the haunts of his youth, and revived by his frequent visits to those familiar spots, yet there is no evidence that he travelled much even in England; and it

is mere matter of conjecture that he ever visited or resided in foreign countries. In fact, as far as can be ascertained, he seems to have spent his life chiefly between London and Stratford-upon-Avon; in the former, associating as a genial companion with all sorts and conditions of men, alternating extensive study of books with the ordinary amusements of the day; and, in the latter, devoting himself to those domestic cares or pleasures, or enjoying the calm tranquillity and repose, to be met with in the life of a country town.

Yet, while so employed, what a profusion of intellectual wealth did he bestow upon mankind, himself, in all probability, unconscious of the priceless treasures he was lavishing by his pen! Unlike the majority of great authors, but resembling his prototype, Homer, he has left no description of his own individual character, which is entirely merged in the creatures of his fancy. The personal history and opinions of Homer are lost in the mists of antiquity, while Achilles and Hector, Agamemnon and Priam, Ulysses and Nestor, Andromache and Penelope, stand before us as living realities, depicted in their habits and language as they lived, or as they might have lived, drawn from the recesses of the poet's imagination, but marked with the stamp of Nature and of truth. So the Bard of Avon intrudes none of his personal sentiments, whatever they may have been, upon the attention of his readers, with the exception, perhaps, of some obscure and vague allusions in the "Sonnets." He threw himself into the characters which he drew, and lost his own individuality in theirs; and though Shakespeare himself were a shadow or a myth, yet Othello and Shylock, and Lear, and Macbeth, and Falstaff, are the living and breathing representative types of human character, of which the faithfulness to nature is universally conceded, the pictures of which are impressed upon the minds of all, and their language familiar in every mouth "as household words."

Regarding the pursuits of Shakespeare in connexion with his psychological development, it must be admitted that the exciting motive which gave birth to his marvellous productions was the necessity of the acquisition of property by means of his dramatic powers. The precise circumstances under which each play was produced are at present quite unknown, and the dates at which they were respectively written are only matters of ingenious conjecture; but in all probability the composition of most of them was generally suggested by the emergency of the moment, as in the dramatic compositions of our own time. The public demand for novelty, the appearance of some romance or tale which seemed fit to be adapted for dramatic purposes, the suggestions of some aristocratic patron, and even the

peculiarities or caprices of the players, may have influenced his choice of subjects, and may also in some instances have crippled or perverted his genius. If it be true that Queen Elizabeth, by wishing to see Falstaff represented as in love, was the motive power in the production of the "Merry Wives of Windsor," the inferiority of the Falstaff in this play, as compared with the same character in the First and Second parts of "Henry IV.," receives a reasonable explanation, and proves how widely literary compositions "made to order" differ from those which spring spontaneously from the author's mind; for there is the most marked distinction between the genuine humour, the overflowing geniality, and, we may add, the gentlemanly bearing of the Falstaff in "Henry IV.," and the coarse and vulgar language, the absurd adventures, and the pantomimic horseplay of the hero of the "Merry Wives." So, too, the beautiful lines put by Shakespeare into the mouth of Oberon in the "Midsummer Night's Dream" in reference to the "fair vestal throned by the west," were obviously intended as a delicate compliment to his royal patroness; and the odious and, in fact, overdrawn picture given by him of Richard III. may be traced to the desire on the poet's part to depreciate the House of York, and thereby indirectly to flatter that of Lancaster, from which the Queen was descended.

A remarkable instance of the influence of external circumstances on the psychological constitution of Shakespeare is to be found in the play of Henry VIII. The reign of that monarch, regarded at a distance of more than three hundred years, presents apparently an excellent theme for the powers of the dramatist. Without recalling in detail the history of that period, its prominent features were the character of the King himself, a compound of selfishness, vanity, generosity, meanness, cruelty, scholarship, pedantry, and other heterogeneous and conflicting qualities; the circumstances attending the Reformation in religion and the controversies on the subject; the relations existing between the King and the Pope, and the divorce from Queen Katharine; the murders (for so they were) of the King's wives, including Anne Boleyn, the mother of Queen Elizabeth; and the rise and fall of Cardinal Wolsey. Now, if Shakespeare had been a free agent, unfettered in the choice and management of his subject, what a splendid play might he have written on so copious a theme as Henry VIII.! But, writing as he did, in the reigns of the King's daughter and of James I., and anxious, as he evidently was, to secure or retain the favour of the reigning sovereign, he has produced only a second-rate play, in which King Henry's bad qualities are thrown entirely into the background, and his

good ones, it must be admitted, are not very prominently displayed. The characters of Queen Katharine, however, and of Cardinal Wolsey, are admirably drawn, and form the redeeming features of the drama. The date of this play is not exactly known, but from psychological reasoning it is inferred that it was begun in the reign of Elizabeth, and finished in that of James I., and the reasoning is as follows:

The chief part of the play being devoted to developing, though not very forcibly, the good qualities of the King, and the circumstances of his divorce from Katharine and his marriage with Anne Boleyn being smoothed over with great tact, the last scene represents a gorgeous pageant attending the christening of the infant Elizabeth, when Cranmer takes the opportunity of delivering a prophetic speech on the future destinies of the royal child; and the most fulsome flattery is really bestowed upon the then aged Queen of England by Shakespeare. But it is to be observed that in the middle of his speech Cranmer, or rather Shakespeare, bestows equal flattery on James I., who is to rise "star-like" and "great in fame," as herself, and "reach his branches like the mountain-cedar to all the plains about him"; and then changing the pronoun "he" into "she," the praises of Elizabeth are resumed, though it is admitted "she must die, she must, the saints must have her—yet a virgin, a most unspotted lily." There can be very little doubt that the eulogy of James was interpolated by Shakespeare after the accession of that monarch, and was introduced to flatter the rising sun, and at the same time to neutralise the extravagant encomiums lavished on the deceased queen, who, as is well known, entertained no great regard for her successor. He, on the other hand, had no regard for her, and on the contrary probably held her in detestation as the murderer of his mother, as no doubt she was, whatever views may be entertained as to the execution of the unfortunate Queen of Scots and the causes which led to that event.

Transcendent as were the psychological energies of Shakespeare, there can, I think, be no question that the plays were written and produced mainly with the immediate object of making money; and it is quite certain that Shakespeare himself paid little regard to them after they had once served his purpose. About the year 1612 he quitted London, and spent the last four years of his life at Stratford-upon-Avon, where he passed his time in easy circumstances. So far was he from employing his leisure in correcting or modifying his immortal works, that his plays were left behind him at the theatre when he left London, and these were not always correct copies, but in many cases consisted only of fragmentary scraps or sheets

made out for the use of the actors. Seven years after his death the plays appeared in a collected form in a folio volume, edited by two of his fellow-actors; but, valuable as this collection undoubtedly was, it was necessarily imperfect in many particulars, and hence the innumerable corrections, or supposed corrections, of the poet's words, and the uncertainty, in too many instances, of his real meaning in many passages.

Imperfectly as his works have reached the present day, there are yet amply sufficient materials to prove the colossal nature of his intellectual powers, although the attempt to form definite conclusions as to the psychological processes by which such gigantic results were achieved must necessarily be abortive. The same bent of inclination which makes a sign-painter in one case, develops in another a Leonardo or a Correggio; the appreciation of harmonious versification which is struggling for expression in the ballad-monger inspires in another instance the pathetic or humorous strains of a Burns or an Ettrick Shepherd; the ear for music which draws melody from the fiddler on the village green or the rustic ale-house, becomes, under cultivation and favouring circumstances, the animating principle of a Mozart or a Beethoven; and the necessities of the play-house and the occupation of what may be called dramatic tailoring may produce little or nothing from thousands of ordinary playwrights, but they have once, and once only in the history of mankind, called forth the genius of a Shakespeare!

The psychological study of Shakespeare himself is a difficult, but a restricted subject, from reasons which have been given in the above pages; the psychological study of Shakespeare's *characters* is a very different and far more extensive theme, which cannot even be glanced at within the present limits.

ART. IV.—CODIFICATION OF THE COMMON LAW AS TO
INSANITY.

By EDWARD C. MANN, M.D., Physician-in-Chief to Sunnyside Retreat for Mental
and Nervous Diseases, New York, U.S.A.

I AM sure that the acute minds of many of our most distinguished lawyers have not failed to perceive the incongruities and deficiencies of the present law, and yet there are many who seem adverse to any attempt to make the law of insanity more conformable than it is with medical science. Lord Justice Bramwell told the Select Committee on the Homicide Bill: “I think that, although the present law lays down such a definition of madness *that nobody is hardly ever really mad enough to be within it*,* yet it is a logical and a good definition.” He further stated that, in his opinion, the law was right, because it might deter many insane persons from crime by the threat of punishment. Lord Justice Blackburn, in his testimony before the Select Committee on the Homicide Bill, said: “On the question of what amounts to insanity that would prevent a person being punishable or not, I have read every definition which I ever could meet with, and never was satisfied with one of them, and have endeavoured in vain to make one satisfactory to myself. I verily believe that it is not in human power to do it. You must take it that *in every individual case you must look at the circumstances* and do the best you can to say whether it was the disease of the mind which was the cause of the crime, or the party’s criminal will.” He also said: “*But we cannot fail to see that there are cases where the person is clearly not responsible, and yet knew right from wrong.*” He then goes on to give the case of a woman he tried who had killed one child and was going to kill another, but who fortunately dropped the second child and went to a neighbour, telling her what she had done. This woman clearly knew the difference between right and wrong, and knew the character of her act, and, on the definition in the *M’Naughten* case in 1843, was guilty. Lord Justice Blackburn, however, as the woman was a raving maniac, so charged the jury on the ground of exceptional cases that the jury found her “not guilty, on the ground of insanity,” and rightly. The Lord Chief Justice of England, in his criticism of Sir Fitzjames Stephen’s plan of

* Italics are mine.

codifying the law of insanity, said: "As the law as expounded by the Judges in the House of Lords now stands, it is only when mental disease produces incapacity to distinguish between right and wrong that immunity from the penal consequences of crime is admitted. The present Bill introduces a new element—the absence of the power of self-control. I concur most heartily in the proposed alteration of the law, *having been always strongly of opinion that, as the pathology of insanity abundantly establishes, there are forms of mental disease in which, though the patient is quite aware he is about to do wrong, the will becomes overpowered by the force of irresistible impulse; the power of self-control, when destroyed or suspended by mental disease, becomes, I think, an essential element of responsibility.*" The Lord Chief Justice of England, in his weighty and truly scientific opinion, the intrinsic weight of which is immense, deserves the admiration of both the legal and medical profession all over the world. Lord Moncrieff, the Lord Justice Clerk of Scotland, has said from the bench that "*in point of fact there are very few lunatics who do not know right from wrong,*" an opinion which I have myself insisted on before the New York Medico-Legal Society in two different papers read there. If we have the *absence of self-control produced by disease of the body affecting the mind*, in any given case of homicide on trial, it seems to me that every fair-minded lawyer in America will concur in acknowledging that we have here a philosophic or scientific principle on which to found the plea of "not guilty, on the ground of insanity," and one which includes the cases of all insane criminals. It does not seem to me that in the question of what constitutes insanity the members of the two great professions of law and medicine should, or at all need to, entertain essentially different and irreconcilable views, or that on the question of the irresponsibility of criminals who are supposed to be insane there should be such a diversity of opinion as exists to-day. The physician naturally studies the whole history of his patient and his ancestry, and searches for the causes of any bodily and mental changes that he finds, and thus arrives at the true pathology of the disease; while the lawyer and jurist is mainly interested in the *existence of mental disease, its degree and its influence on conduct.* We know far more about insanity than they did in the last generation, and it is obviously unfair that laws pertaining to insanity, when the knowledge of that disease was comparatively in its infancy, should not be amended to keep pace with our increased knowledge of the pathology of mental disease. In that form of homicidal monomania where the patient is possessed of a sudden, blind, motiveless, unreasoning impulse

to kill, I do not think that there is any desire, motive or reasoning intention to commit such a deed, the true pathology of this form of insanity consisting, it seems to me, in a *vis a tergo* received from the diseased action of the brain. We have here a *diseased state of mind with absence of self-control*. We have in suicidal monomania also a *vis a tergo* received from the diseased action of the brain, in which, while perhaps our patient exhibits no other mental derangement, with no delusion or other intellectual disorder, the blind, motiveless, unreasoning impulse to suicide which, alike with the homicidal impulse, is the joint result of undoubted insanity. In both these cases the impulse is long enduring, and gives rise to actions of patient deliberation, and of cunning contrivance. The lawyer and physician are willing alike to recognise disease in the suicidal act; why, then, the apparent unwillingness to recognise disease in the homicidal act? We must not look at these questions socially and ethically, but by the aid of the light of modern pathology, as the Lord Chief Justice of England has done already. There are many persons born with a predisposition to madness, and symptoms indicating that disease display themselves at frequent intervals through the whole course of life, but for many years may never reach such a pitch as to induce those in contact with such persons to treat them as insane. When an overt act is committed by such persons, can anyone question the value of a careful study of the past life and acts of the accused? His life has exhibited the natural history of insanity, and with our present accurate and trustworthy method of investigation, a careful and experienced physician in nervous diseases can clearly point out to the lawyer and jurist the unmistakable evidences of mental disease which the latter, necessarily, alone and unaided, could not discover. The lawyer and physician should naturally aid each other in such investigations, impartially and by the light of science. I have elsewhere pointed out that epileptics are to be classed in the most homicidal group of all, also that puerperal women and women at the climacteric period are subject at times to dangerous delusions, and also that kleptomania is a peculiarity of a certain number of cases of general paralysis. These facts are classical, and should be so accepted by the judiciary and by the legal profession generally. In a paper on "Mental Responsibility and the Diagnosis of Insanity in Criminal Cases," read before the New York Medico-Legal Society and subsequently published in the English *Journal of Psychological Medicine and Mental Pathology*, I suggested a series of eight questions which, it seemed to me, if adopted by jurists in criminal cases, would form a most efficient and just test in any given case. Perhaps the legal profession may prefer

the simpler proposition which, as the result of Sir Fitzjames Stephen's attempt to codify the common law of England on insanity, may be briefly summed up as follows, viz., *homicide is not criminal if the person by whom it is committed is, at the time when he commits it, prevented by any disease affecting his mind from controlling his own conduct.* This is very simple and very comprehensive, and therefore the legal profession may very properly prefer it to my own. The eight questions which I proposed in my paper are as follows, viz. :

1. Have the prisoner's volitions, impulses or acts, been determined or influenced *at all* by insanity, and are his mental functions—thought, feeling, and action—so deranged, either together or separately, as to incapacitate him for the relations of life?

2. Does the prisoner come of a stock whose nervous constitution has been vitiated by some defect or ailment calculated to impair its efficiency or damage its operations?

3. Has the prisoner been noticed to display mental infirmities or peculiarities which were due either to hereditary transmission or present mental derangement?

4. *Has the prisoner the ability to control mental action, or has he not sufficient mental power to control the sudden impulses of his disordered mind, and does he act under the blind influence of evil impulses which he can neither regulate nor control?*

5. Has the act been influenced *at all* by hereditary taint which has become intensified so that the morbid element has become quickened into overpowering activity, and so that the moral senses have been overborne by the superior force derived from disease?

6. Was the act effected by, or the product of, insane delusion?

7. Was the act performed without adequate incentive or motive?

8. Does the prisoner manifest excitement or depression, moody, difficult temper, extraordinary proneness to jealousy and suspicion, a habitual extravagance of thought and feeling, an inability to appreciate nice moral distinctions, and finally does he give way to gusts of passion and reckless indulgence of appetite?

Some or all of the characteristics in number eight are found generally in connection with transmitted mental infirmity.

In closing this perhaps too lengthy paper, I desire to speak briefly upon the subject of testamentary capacity. In my opinion the mental unsoundness of a man, if unconnected with the testamentary disposition, ought not to destroy testamentary

capacity. If the will of a person is not affected by, or is not the product of, an insane delusion, it should be regarded as valid. Delusions *per se* should not, I think, void a will. A person may be a monomaniac and yet have sufficient mental capacity to make a valid will. In such a case the mental faculties are often unimpaired and undisturbed. The most important point to be looked into is *whether the testator has ignored natural affection and the claims of near relationship* in the making of the will in question. The testator's mental faculties must be so far normal that he shall understand the nature of the act and also the consequences of it, and *he must also have a clear idea as to the amount of property which he is disposing of*. There must be a clear, sound moral sense, and the human instincts and affections must be intact. There must be no insane suspicion or aversion, and no loss or impairment of reason and judgment. A person should not be considered capable of making a valid will if the act in question has been the product of, or has been actuated or influenced at all by—first, hereditary taint which has influenced his volitions, impulses, or acts; or, second, by mental disease or insanity which has weakened, perverted, or destroyed the mental functions.

ART. V.—MANIA ERRABUNDA.

By W. A. F. BROWNE, LL.D., formerly Medical Commissioner in Lunacy, Scotland.

IN antiquated synopses, or systems of nosological arrangement, may be found the words which form a title to this communication. The specific name and the mental excitement which it signified have almost or altogether disappeared. The same observation applies to many other modifications of the neuroses, but in many such instances the designation is the only vestige which remains, like the obscure forms in an archæological museum, of what was formerly, in all probability, an important element or factor in the social or individual economy. Although, for example, lycanthropia and the dancing mania are now rarely, if at all, to be encountered, I may record that, in what is now a very protracted novitiate, a case of each of these species has been committed to my care, which proved, after sufficient experience, to resemble in all particulars the epidemics of the Middle Ages. The disease of which we treat, presented, as its most prominent and characteristic symptom, a propulsion to move, more frequently to run or rush, forwards in a direct line. This wild career was executed without any regard whatever to roads, rivers, or bridges. The patient traversed morasses, stumbled over rocks, waded or swam rivers, and appeared but little conscious of the wounds or injuries or inconveniences received in this procedure. In many examples where information could be extracted from the sufferer, he was not urged onward by any appreciable motive. He did not desire to reach any particular object, and was conscious of no other impulse than a desire for change of place, for rapid motion, and that in a straight line from his existing standpoint. The solitary instinct to wander speedily forwards was the typical germ of the affection; but it is not contended that, in the majority of individuals affected, there were not other motives in operation; that while one might confess to act like a machine in obedience to a blind and unintelligible law, many others would assert that they were escaping from an enemy, an avenger, a phantom, a fire, or some unknown or inexplicable danger; and others that they were attracted by a search for pleasure, or fame, or gold, or some coveted object which could be reached and secured only by the means which they adopted. While marked and distinct forms of this malady are now extinct, a rapid motion, racing, or hurrying to

and fro in the wards or galleries of an asylum, or wherever the sport of insane propensities may be confined, are still significant of many aspects of lunacy. While many diseases have ceased to exist, or have been greatly minimised in number by changes in our manners and customs, even our agriculture, commerce, or government, it may be fairly argued that the Mania Errabunda has been arrested by the multiplication of asylums, and by the seclusion of that class of patients who are likely to be infected or influenced by the tendency described. It is certain that many physical causes, in conjunction with moral perturbations, must have contributed to produce the extraordinary manifestations of muscular and mental excitement in this affection. It might have been predicated that of the latter the depressing passions and sentiments would be the most powerful and prominent; and, accordingly, at a time when this species of mania was placed under such scientific research as then existed, it would appear that whatever enfeebled the vigour of the body, or the emotional nature, established conditions which eventuated, or which might have eventuated, in this running amuck against all external objects. In fact, it has been suspected that the Malay or, latterly, the Indian practice of rushing, being armed with a cutting instrument, through and against all friends and foes who might oppose their path of blood, and striking down every living obstruction, may be little more than a modification in savage tribes of those solitary cases which occurred among people claiming to be civilised or partly civilised. This is all the more feasible when it is known that the performers in these tragedies were previously roused to the highest pitch of excitement and recklessness either by drugs or hatred, or a desire for distinction. However this may be, we find Arnold enumerating among the prime factors of that "spasm" of the large vessels, and even the heart itself, but especially, and conspicuously, of the capillary arteries on the surface of the body in which Pathologically, Panphobia was believed to consist; and effects of "spasm," reaction, relaxation; all of which, in some degree or other, in proportion to the violence and duration of the passion of fear, are instrumental in the production of debility*—debility inducing that alarm, consternation, terror, which were held to be the first mental stage of this curious malady. More recently we find in Feuchtersleben† that the disease now under consideration has been distinguished as (1) Melancholia, Errabunda; (2) Dull, Attonita. In restless melancholy the patient is contented nowhere—he flies he

* Arnold on Insanity, 1786.

† 1847.

knows not why or whither. It has even been suspected that the constant desire for change of locality is itself morbid; and, when affecting whole tribes or nations, where neither conquest, nor pasture, nor any kind of profit tempt to migration, may be accepted as an epidemic psychopathy. In retreats and military routs, such as that from Moscow, where the desire to escape from impending danger, or to seek refuge of some sort, actuates thousands or hundreds of thousands, to the utter disregard of honour, order, and discipline, and even of safety itself, there can be no doubt that the mind of each individual of the vast mass of refugees is under the dominion of the mono-idealism of terror, and that neither external impressions, nor the considerations which would affect conduct at other times and under other circumstances, are received or consciously appreciated.

In corroboration of that marvellous discrimination and insight into the diseased as well as healthy elements of human character, which were embraced in the penetration of Walter Scott, and which was signalised in our last number, we may here introduce the fact that in the "Fair Maid of Perth" there has been depicted a striking illustration of Mania Errabunda, in the case of Connacher, who, paralysed by his native cowardice and by the slaughter of his clansmen in the appointed combat, flies from the scene, crosses, as was necessary, valleys and mountains and every impediment, until he loses the consciousness of his all-engrossing panic, and, if we remember, life itself in his vain flight.

It will, we think, be instructive to record that such aspects of alienation are not confined to the pages of a romance, but may be still, although rarely, met with. We were lately consulted by a colonist, whose friends related the following chapter from his recent history. He is a man of education, of strictly moral, even abstemious, bearing, is active and correct in his business habits, is married and has a family. In certain transactions he was uncourteously and unfairly treated by one who was his debtor, at least for good offices, and whose behaviour inflicted a severe wound alike upon his feelings of friendship and conscientious sentiments. This wound seems to have gangrened or to have sunk deeply into his very heart, as he not merely suspended all his relations and intercourse with the offender, but betrayed indifference towards his former occupations; became moody, depressed, even dejected, although his affections underwent no change, and his intelligence, when suitably roused and interested, was as acute and practical as before. He recoiled from the persons, the engagements, and surroundings connected with the insult or grievance, which had inflicted so much pain and disturbance on his mental system; and this

estrangement amounted almost to timidity and apprehension, although it was not panphobic, as his sensitiveness and irresolution were limited in range, as has been pointed out. The observation of those around did not detect any marked departure from bodily health; in fact, the alteration noticed was in his habits of thought and action, and not in discernible loss of strength or health. One peculiarity attracted attention, and this consisted in his tendency to somnolency, when not roused or irritated by the recollection of the affront, which haunted and harassed him, or when not checked or controlled by the circumstances in which he was placed. Without any announcement or communication with his family or dependents, and without any known object, he left home, but was subsequently discovered at the house of a friend, at a great distance, by whom he had been encountered, wandering, or rather hurrying forward, without any settled purpose, and with no intention, so far as could be ascertained, of proceeding to the residence where he found shelter and a home. This escapade was followed by a profound and prolonged sleep, which might have been attributed to fatigue and exposure, had not its duration indicated its morbid character. On being joined by his family he vouchsafed no explanation of his extraordinary conduct, nor did he appear to regard the act committed as at all inconsistent with his own arrangements and interests, or with those of others. On being questioned and urged to confess his motive, and the object which he desired to accomplish, he failed to do either; and it became obvious to himself and to his friends that the period between his leaving his own house and his reception in that of his acquaintance was a blank; that his departure, direction, and subsequent course had no meaning, and had left no explicable impression on his own mind. Even now, when conscious that his actions must have been dictated by disease, he was utterly incapable of assigning any theory, conjecture, or speculation as to the ideas or incentives which hurried him on in his wild and irrational course. When recovered from the fatigues of this journey, he displayed the same change in his original dispositions, the same tendency to slumber at inopportune times, and it was noticed that he often sat staring at a given point, or on the leaves of a book or newspaper, while it could be demonstrated that he really saw neither the one nor the other. Treated somewhat as an invalid, and while, I think, under the care of his medical attendant, he disappeared from the apartment where he had been resting on a bed. He was clothed, but wore no hat, neck-cloth, &c., made his exit through a window on the ground floor, and was not seen or heard of during the day. Upon this occasion he returned spontaneously, having recovered some obscure

degree of consciousness on reaching a spot which he recognised, about twelve miles from his home, and which must have been reached by traversing copse, scrub, road, rough and unreclaimed land, and every kind of surface which a new colony can present. His awakening to the actual circumstances of his case was produced, according to his own conception, by the voice of a daughter, then at a great distance, requesting him to come home. It is likewise necessary to state that he supposed himself influenced by a desire to visit a sister, which was regarded as of morbid origin. At this stage he was recommended to make a voyage to his native country, in the expectation that so great a revolution in the circumstances, scenes, and associates of his life, as would be necessitated by such a course, might expedite the expulsion of his dominant tendencies, and the introduction of mental impressions under the control of his will.

On his arrival in Europe he was seen by me, when there remained no discernible physical disturbance except occasional muscular tremor, chiefly confined to the upper extremities, and having no apparent connection with existing feelings or fancies. He retained, however, the same shyness, sensitiveness, and intolerance of crowds, companies, or even of strangers. He disliked and dreaded recollections and allusions connected with the land of his adoption, with his former employment, with the event which had given so powerful a shock to his nervous system, and it was observed that he avoided opening letters, even of commercial importance, which reached him from his former abode. He was suspected of still gazing steadily and continuously without seeing, and was more curt and uncourteous in his manners than previous to his illness. When consulted, the writer of these lines was too much of an invalid to do justice to the case, and the patient was recommended to place himself in the hands of an eminent physician distinguished for his knowledge of mental diseases, who emitted the following opinion, which may be read with interest, as a pathological diagnosis, when compared with the statement of the rational symptoms previously given :—

“ I recognise in Mr. —, who called on me this morning, the early symptoms of cerebral atrophy—a disease obscure in its origin and insidious in its progress. The curious seizures of impaired consciousness from which he has suffered, the diminished power of attention, the depression of spirits, the somnolency amounting on one occasion even to coma, the general fibrillar tremor of the muscles, the intra-cranial sensations and perspirations of the head and face, the sluggishness of the pupils, or smallness of the irides, the diminished sense of equilibrium, the enfeeblement of the circulatory and digestive organs—constitute a group of symptoms, inexplicable only in its theory

that the highest centres are involved in changes, which, considering Mr. ——'s age and antecedents, are probably of an atrophic character. But no irremediable damage has been done as yet. If Mr. —— goes back to business and subjects himself to work or worry, he will break down speedily and hopelessly; signs of organic changes in the brain of a gross or grave nature will soon show themselves, and his life will not be worth five or six years' purchase. But if, on the other hand, he is warned in time, imposes no further strain on an organ that is on the verge of degeneration, but nourishes it carefully and exercises it moderately, then wasting will cease, compensation take place, and he may reasonably look forward to a long life, and to a fair capacity for mental work. Reparative processes are indeed now in progress, for it seems certain that he has gained ground since leaving his business and taking rest.

“ My advice, then, to Mr. —— is, do not think of returning to your adopted country or work at present. Take at least twelve months of complete repose of body and mind as is attainable in this country. Don't let the intellect lie fallow, but cultivate it in a new way. Take up some subject as alien as possible to your old pursuits—history, or botany, or entomology; be constantly in the open air, avoid excitement, live plainly, take no stimulants, and follow out the course of medical treatment indicated.

“ As in all cases of cerebral atrophy, it is difficult to fasten on the causes of Mr. ——'s illness. Probably constitutional tendencies have had something to do with it (a brother of his died of paralysis), and probably climatic conditions and business anxieties have had a hand in it. The important point to note is that the disease is still in its critical stage, and may be arrested.

“ I should recommend Mr. —— to take for some time I. nitro-muriatic acid; II. syrup hypophosphites; III. coca wine.”

It is an agreeable close to this narrative to announce that, after taking the remedies and following the recommendations prescribed, the patient has been completely restored to mental and bodily health; and that, with the exception of a slight abruptness of manner, he presents the same characteristics as previous to his indisposition.

ART. VI.—THE ORIGIN AND GROWTH OF DREAMING.

THE subject of dreaming, as full of mystery and fraught with fascination, has always interested the thoughtful in every age. It seems doubtful whether the innate tendencies of the human mind to unduly love the supernatural has not often caused too much prominence to be given to the dream itself, without enough consideration of the growth of the habit of dreaming. Perhaps, too, the dreams of childhood have not been sufficiently noticed as the germs of the dreams of a lifetime. May it not, indeed, be that the precise form and manner of dreaming is more or less distinctly moulded and determined for each individual very early in life? May not many other dreams, which seem remarkable, be traced back to unconscious memories or impressions upon the brain which have hitherto lain dormant, or in some cases to atmospheric influences, causing both the dream and its fulfilment.

It would appear that a conception of sleep and dreams may be one of the earliest of which we are capable. In counting the distinct words used by a child of two years and three months, in a number amounting to 3,140, of which 1,260 were substantives, all of the latter, as might naturally be expected, were the names of things, and unconnected with ideas, with the exception of 47. These 47 included *sleep* and *dreams*, of which the child had so distinct a realisation that it attributed to flowers the faculty of dreaming, and said, "How much the wallflowers must be thinking, during their long sleep, of what the garden and everything would look like when they awoke." Yet unable to enter into the new products formed out of ideas in dreams, it tried to explain away the wonderful beauty of a certain doll's dress of which it had dreamt, by saying that "it must have been really an old one cleaned and made to look quite different." When a dog who has been in the possession of a kind master for many years, howls in sleep as if beaten, and testifies his joy on being awakened, we may only surmise that he has had terrible dreams of his own former experiences, or of those of his ancestors, and rejoices to find that they are not realities. So too with regard to the dreams of early infancy. We can rarely attempt more than faint guesses at truth, for when an infant of eight months old gives utterance in sleep to terms of endearment which it never uses when awake, and has only heard from

a nurse, who is absent for a night, we have no means of telling whether it dreams of the nurse or of its doll, or is merely an example of unconscious mimicry. It was interesting to trace back to its cause the dream of a child who at eighteen months was much frightened by seeing a hideous old woman with misshapen bloated face, standing by a gate near a country church. A year later, after seeing a similar church, and having eaten chocolate creams in the evening, it seemed to dream of this old woman, and talked in its sleep, exclaiming, "I want to go to the church ; I am frightened of that old woman ; send away that ugly old woman standing by the gate." Might there not have been in such a case countless sensorial memories, the scent of flowers, the hum of insects, the bleating of lambs, and other sounds peculiar to the time of year, to call up associations and act upon the brain ? Very young children certainly dream much of their toys ; and any bodily states which would in the adult cause painful dreams of humiliation of self, induce the same in them. The young child is distressed in sleep at the fancied loss of some article of clothing for a doll, or because it has "old milk" given to it instead of new ; it dreams that its toys are taken away, or has a nightmare that some one is holding one of which it strives in vain to obtain possession, and a strong effort of will seems to awake it as it exclaims, "I must have my doll's right frock, the one that I want." A striking instance of the direct translation of ideas in sleep into movement of speech was that of an infant of twenty months, who very rarely spoke in its sleep, and on having a mustard plaster put upon its chest whilst asleep, evidently dreamed that a favourite cat had sprung upon it, and exclaimed almost instantaneously, five seconds might have perhaps elapsed, "Oh, naughty Minnie, to jump up at me like that, go down Minnie."

It would seem as if the whole mystery of the mechanism of memory was closely interwoven with that of dreaming, and that the tactile sense plays perhaps the earliest, although other senses also, a most important part in the building up of a good unconscious memory, and consequently in the origin and gradual growth of dreaming. An infant of eighteen months who knows its way about, and can arrive at any precise spot it wishes to find along a most monotonous country road, may seem to be guided by instinct, and suggest an inquiry into the existence of a sixth sense of direction. But if, a few months later, the same child can give intelligent explanations of the spot where it lost something, and lead the way to it, guided by its own indications as "the place where there were a great many nettles in the ditch, a pink dog-rose which grew much higher than a white one, and there was a sweet smell from some clover, which looked

as if it was made into bows," it becomes easy to realise how, when a year older, it can show the way home in London, by a route quite unknown to it and never even seen before ; the way this is done being evidently due neither to the possession of a new sense, nor to any special development of other senses. For a young child's mind is open to sense perceptions which, although not lost to the adult, would be received unconsciously, other more violent impressions predominating ; whilst the child receives one separate and distinct impression. Thus a railway whistle at a distance of a mile, which acts in so slight a degree upon the adult ear that we are not aware of its operation, is on another occasion perceived distinctly by the vivid mind of this young child, insulated from all other impressions, who led the way in a strange town guided by it. It is easy to conceive how, later in life, all these processes of smelling, seeing, hearing, and comparing become automatic, so that it would be quite impossible to describe how a result was arrived at.

Thus if Mr. Bishop, whose thought-reading recently attracted so much attention, often played at hide-and-seek when a child, the scientific interest of his experiments, even when successful, may be considerably lessened thereby. If the principles upon which children base their mode of playing at this game be inquired into and noticed, I think it will be found that only a child evidently deficient in mental power, ever blunders to and fro in the room without aim or design, seeking and never finding. The intelligent child appears to have two ways of quickly attaining the end he has in view ; he may, while searching for the object, seek for information by intently reading the muscular indication of his own proximity to it in his companions' faces and hands. Or, choosing a surer way, knowing that hiding an object so thoroughly betrays the idiosyncrasies of character, that each individual has only a few ways of doing it in consonance with his character, he shuts or fixes his eyes for a moment to concentrate his attention, and then bases his search on the supposed character of the person who hid the object. If the latter should attempt to hide it in a way utterly at variance with the broad lines of his disposition, as shown in his face or felt in his muscles, something unnatural about him quickly betrays itself, and he will choose a place so foreign to his whole nature's bent that it is speedily divined. A good deal of seeming clairvoyance in sleep, and even instances of so-called second-sight may be perhaps explained in the following way. The power of thought-reading, so active in childhood, has left extensive substrata, as it were, of different expressions of people's faces stereotyped on the brain ; each flitting expression or glance of the eye having its own meaning attached to it. Perhaps no one

could consciously call up, classify, and utilise these long dormant memories ; but an intense concentration of attention may often bring to light and group together old memories which shall seem like intuitions, and apparently produce almost miraculous results. May it not be that some of our keenest intuitions are thus originated, and that occasional opportunities of tracing their source to events in early life, may bear on the origin of many seemingly remarkable or even prophetic dreams ? One conscious instance of this process may be worth recording. As a young child I chanced to recognise in a begging impostor a man who had twice before appeared very differently dressed, with a new story of distress each time. I believe that I did not at all enter into the deception, but thinking rather to express an interest and sympathy in the very varying circumstances of his life, I confronted him with, " You have been here before ; the last time you were a countryman with a green coat, and all your little children had been burnt in a fire." A fierce glare in the man's eye, accompanied as it was by a volley of oaths, left that expression of the eye indelibly fixed on the brain to be recognised afterwards at most unexpected moments, but never with its true significance at once attached to it, but only after an interval of half-conscious effort to revive the associations. Once it was seen in a pretended clergyman when one of his pupils, probably a mythical one, was spoken of by mistake as Brown instead of Smith ! Perhaps a certain halting or sluggishness in the process by which the remembrance was arrived at, made that recognisable to me, which to another would have been a momentary and sure intuition.

Probably first and foremost in the origin of the manner and form of each one's dreaming must be placed the inherited conformation of his brain. Although no two persons dream precisely alike, yet a strong family likeness may often be detected in the dreams most common to those related to one another. Next must be traced a curious relation between vivid impressions of a painful kind, received at a very early age, and the dreams which persistently cling to a person, and reappear throughout the whole after life, in connection with certain mental and bodily states upon which they apparently depend. At about the age of two, sometimes much earlier, there appears to be an important crisis in a child's mental history ; its first direct cravings after the supernatural, it " wants to go into the stars," is in intense sympathy with nature in her varying moods ; is terrified at the unknown, sees in shadows " great men with big white hands," or a vague " something in the corner." Some of the kindergarten toys would seem to be of great value in inculcating early, before this crisis arrives, the difference

between shadows or semblances and realities. Especially might be mentioned the second gift of the revolving cube. If the critical moment be rightly used, and the source of a shadow be shown to the infant, a great gain has been achieved; it will of its own accord recognise a cat's fear of a top spinning, and reassure it by leading it up to touch it when not in motion, and explain to it that it "must look at it closely and find out what it really is and understand it, and then it will not be frightened at it." But if the earliest fears in the unformed mind of the infant are left to vibrate there, it is hard to tell to what they may not in time grow. Doubtless many nervous miseries would date from such neglect; and it seems quite possible that any tendencies to brain disease would be readily lighted up by the too susceptible mind left untrained, thus morbidly preying upon itself, and that such a child would be also predisposed to fall a victim to the first epidemical illness which should attack it in a form at all severe. A relative of my own, who was narrating instances of the harmful effects of sensational nursery rhymes on the minds of young children, alluded to one intended to deter them from taking birds' nests, by bidding them to picture to themselves "some great monster a dozen yards high, who might stalk up at night to your bed, and out of the window away with you fly, nor stop while you bid your dear parents good-bye, nor care for a word that you said." He vividly described the terror with which he used himself to fancy at night, as a young child, that he saw the great arm put in at the window to take him out. He also mentioned as a whimsical feature of one of his most frequent forms of terrible nightmare, which had clung to him from childhood, that there was always a sweep connected with it, sometimes six sweeps, each one growing bigger and bigger as he vainly tried to elude their pursuit. I was able to account for this, and could trace the peculiarity to a very early infantile impression received from the verse of another nursery rhyme about a child, who "at night when he was gone to bed did jump up in his sleep, and sob and weep and cry again, 'I thought I saw the sweep.'" I never myself saw this traditional being even in dreams, but always after hearing the rhyme recited in the evening was full of horror and unable to sleep for fear lest I should see the sweep. Madame de Staël's confession about "les revenants," "Je ne les crois pas, mais je les crains," would well embody the experience of many children.

Of nightmare dreaming, my own earliest experiences date from about the age of twenty months. There were only two forms of it: in one my fingers were inextricably entangled in

masses of long yellow hair, from which I vainly fought to free myself, whilst unable to cry or utter a sound ; in the other I was trying to open a huge book with golden-edged leaves, which closed just as I was turning them over. Both dreams were accompanied by the same prolonged helpless silence so characteristic of nightmare, from which I always awoke screaming, and with a dread which lasted for a considerable time, when I was so greatly relieved by the presence of anyone near me as to gladly submit quietly to remedies for all kinds of pains which were imagined for me. Most curiously, once, and only once, again these two forms of nightmare have re-appeared in later life—at a moment when bodily and mental tone and power were much exhausted. When at a little more than three years old, I heard of two robberies, a definite form was given as a colouring for many nightmare dreams : holding a door to keep robbers out, or fleeing from them under all kinds of circumstances. A little later a fright from a mad dog added that as a variety of dreaming. Probably some of the worst horrors of nightmare remain unknown to those who, like myself, never see monsters, and lack imagination, perhaps, to experience it in its worst forms ; or memory to conceive, when awake, those that have been really experienced, with all the vividness of their terrific associations.

It would be most interesting to know whether those who, when writing on nightmare, have attached so grave an importance to the sensation of dying *in sleep*, as to conceive it possible that death might even take place under such conditions, have ever known what it was to be *really* dying, with an intense and passionate clinging to life, and a perfect realisation how narrowly it was trembling in a balance whose stronger impulse was towards death. Three times I can recall having *died* in nightmare dreams, and the horror of the last gasp always awoke me, and there mingled with the quiet sense of relief and keen satisfaction at being really alive, enough of interest and amusement to leave no dread of going to sleep again. The most agonising part of one dream was a prolonged feeling that a word spoken in time would have saved my life, but that then it was too late, the mouth being too rigid and fixed to frame a syllable. A record of individual feeling, which must so much depend on the more or less vivid power of imaginative memory in recalling sensations with their true force, seems worth little on so great a question. But I should incline to find something most analogous to this dream-death in the feeling experienced when there was temporary loss of speech for a few seconds through the pain and shock of burning. A person on fire tries to give an alarm, the lips faintly move, but all power of emitting

sound is gone; another moment and unconsciousness may ensue. By a strong effort of will the thought comes of the horror of such a death, and with it a determination to fight for life and in some way extinguish the flames. By the time this is successfully accomplished, the power over the voice has been quite recovered. Possibly the same intense effort would have also resulted in audible speech then, as it does sometimes in nightmare dreaming, if it had not had to find an outlet in active movement. That the worst pains of nightmare are due to an imaginary or real feebleness of the will, seems evident from the many futile efforts to conquer it and cry out, ending at times successfully; and yet how vain it is to imagine that it is even then quite vanquished. Just once the dreamer may be awakened by his own cry, and proud of his triumph find that in future the will, again enfeebled, will allow him to dream on in spite of his screams.

As a young child interested in the theories explanatory of dreams, advanced by Dr. Abercrombie in his "Inquiries concerning the Intellectual Powers," I carefully tried to practise dreaming and remembering dreams. Yet I never once succeeded by any effort of concentrated thought, at the moment of going to sleep, in giving at will the slightest colour or form to any feature in a dream. I was often enabled to trace the singular blending of common incidents of daily life with scenes read of in books. Chance words spoken, associations revived by the senses of smell or touch, and a likeness, trick of manner or tone of voice in one person in common with another, often caused me to dream of the one thus resembled, when the similarity had been quite unnoticed in waking moments. A sonnet of Wordsworth's "How sweet it is when mother Fancy rocks the wayward brain to wander through a wood," &c., often repeated as a sort of soothing soporific before going to sleep, might have helped to cause many beautiful dreams of tropical scenery and sunny islands, but I never dreamt of a wood, though often of lakes, rivers and water in every form of beauty. It was singular how a companion, very poetical, and with strong imagination, who made the same experiments, had always dreams the most commonplace or dreadful, whilst my own, with the nightmare exceptions, were full of scenes of beauty and adventure which I might try in vain to conjure up in waking hours. As exceptions to the general rule that we do not create images in our sleep, I can recall two dreams, a childish one of a visit to the planet Saturn, and much interesting converse with its inhabitants, who were like flashes of blue forked lightning. I had been reading an essay on the "Plurality of Worlds," and no doubt revived an old memory of an insane person mentioned by Dr. Abercrombie

as having some delusion about Saturn. Much later, after reading Darwin on "Insectivorous Plants," and having eaten a new kind of turnip, I dreamt with intense satisfaction that, by cross fertilisation, I had produced a turnip woman—small, ugly, in fact an animated, elongated turnip, but capable of being utilised in cleaning knives and carrying water!

One incident, most strangely small to have stamped its impress on the brain so fixedly as to recur at long intervals in varying dreams, is the following: I was not four years old when being for the first time led to church in a London square, a red stone, probably a common pebble, fascinated me and seemed to my childish imagination a ruby of untold value. I had just grasped it when a hand on my shoulder forced me to relax my hold, and the memory alone remained. Three points always appear identical in the dreams, the red colour of the stone, my disappointment at not possessing it, and the stern pressure of the hand upon my shoulder. One such dream, the remembrance of whose details were unusually vivid, I transcribed at the time, as it curiously shows how an imaginative and easily impressed person, who had never chanced to trace the origin and gradual growth of dreams, might regard such a one with superstitious belief and supernatural awe.

I dreamed that I was travelling along a narrow strip of firm sandy beach on the brink of a vast ocean. The scene which lay before me was one of surpassing beauty, the waves dashed furiously in, the white foam crests glistened with dazzling brilliance in the glowing sunshine, and men, women, and children were diving beneath the surging billows in search of gold and sparkling gems. Their life seemed so joyous, so full of glee and merriment, that I often essayed to join them, but ever as I did so I felt the strong though gentle hand of an invisible one restraining me, and heard a voice whispering in my ear, "Love not the world, the world passeth away." "But they are not at present in danger," I said. "There is ever danger," was the reply, "for at any moment, when the great wave comes, they may all perish." I never saw the face of my guide, although I was conscious in my dream of a great longing to see it. Once I thought that I left the beach to snatch a red jewel which glittered on the brink of the ocean, I had but time to grasp it ere the unseen one shattered it to fragments which turned black as I looked at them. Suddenly, while the sun shone brightly as ever, and thoughtless people were still pursuing their search, the great wave came, and all changed to blackness and desolation. At the same instant I felt my feet placed firmly upon a high rock, knew that I was near my guide, saw his glorious face, and behind him lofty hills, peak towering

above peak, and as the rosy light of early morning illumined the faint and shadowy outlines he said to me, "The day dawns and the shadows flee away," and I awoke.

To atmospheric influences acting on the brain and senses unconsciously, might be attributed many of the so-called remarkable dreams, presaging death and disaster. As a striking instance of this I had, connected with a conscious knowledge of the unhealthiness of a certain locality, a dream of ghastly horror; I saw in a room, rarely used on account of its gloominess, a swollen corpse, and, though not recognising any features, quite believed in my dream that it was my own. In the morning I heard that the same night another person in the house had dreamt of my funeral, with the most minute details of the place, circumstance, &c., the coffin was in the gloomy room previous to its removal. Less than a week afterwards, when dangerously ill with infectious fever, I remembered the dream as I looked at my purple, swollen hands, and thought how easily might any belief in such a dream as the forecast of doom, have had a fatally depressing effect, and thus have wrought out its own fulfilment. The other person who dreamed had no illness afterwards; but doubtless some subtle change in my countenance or sign of unhealth accounted, together with the state of the atmosphere, for the singular coincidence of two such dreams. There was added to this the knowledge, in the minds of both dreamers, that deaths from diphtheria had formerly occurred in the house.

Often a strong emotional stimulus will be powerful in evoking dreams which depend upon dormant memories, as well in sleep as in that twilight state when those who recount them will say that they hardly know whether they were waking or sleeping. To quote one under the latter circumstances. A mother, very anxious about a sick child of whom a stranger-nurse had temporary charge, seemed suddenly, in the early morning, to see a bottle, which had been two days before full of very strong brandy, standing empty in her child's nursery. Entering the room soon afterwards she looked with curiosity into the cupboard to find her dream or clairvoyant revelation a reality. This was easily accounted for by natural causes. The mother had once seen a woman in a state of incipient *delirium tremens*, who told her that she was suffering from an American disease quite unknown in England, called the "cold chills," and this woman succeeded for a long time in imposing upon charitable persons and deceiving physicians by simulating haemorrhage, &c., until at length a brandy bottle was found hidden between her mattresses. Although the mother's attention was concentrated on the state of her child, she no doubt received unconscious

impressions from the odour of alcoholism, this called up the memory of the long-forgotten sufferer from the "cold chills," unconsciously again the association of the brandy bottle unearthed from the mattresses brought to conscious remembrance the bottle of brandy which the intemperate nurse had suggested, after some had been used for the child, would be best placed in the cupboard because the physician was an ardent supporter of teetotalism. No advantage accrued to the child from this dream as the nurse was on the point of leaving. In another somewhat similar case a mother had three successive dreams in one night about an infant to whom a nurse was secretly administering laudanum, and although they may have contributed to the rescue of the child, their origin could be quite as easily explained. She dreamt that she was in a street in Calcutta, a little boy was on the ground writhing in convulsions, foaming at the mouth; like a dissolving view the face changed, and, as it became the face of her own child, she awoke. Again she slept and dreamt of a half-idiotic child with epileptic fits, to see her own child's face as before, and awake. Yet a third time she dreamt. She was now in an opium-smoker's den in the city of Peking; to her surprise, reclining on the ground, leaning against the older opium-smokers, who were all under the influence of the drug, was a young boy, his face too changed and faded until it became vividly transformed into her own child's face, and, trembling with dread, she awoke. A long series of old memories and recent events were strangely blended in these dreams. The mother had known those who had contracted abroad the habit of opium-smoking; was thus really familiar with its smell, and the expression it gave to the countenance; years before, in a group of children's likenesses, one reclining in the position of the child in the dream had been said to look like an opium-smoker, hence that image; and there had been many unusual acts on the part of the nurse sufficient to arouse suspicion.

To briefly advert to those dreams which cannot be accounted for either by early impressions made upon the brain, by dormant memories or local atmospheric influences. How strange is the belief very general even amongst intelligent persons, that the spectre or semblance of a dying one appears in dreams, not to prefigure, but to announce the event. There is a great sameness about all these accounts; to mention two which came to my own knowledge. A father and son dream the same night that they see the brother of the latter, who is captain of a whaler in the Southern Seas, taken up out of the sea, dripping with water, just drowned; both are vividly impressed with the dream as a sad reality. Weeks pass, and

news at length reaches them that he was drowned at the time of the dream by falling overboard whilst harpooning a whale. A mother, whose son is in the Navy, on board one of H.M. ships stationed at a port in South America, dreams with strange distinctness that her son appears as dead standing between the curtains of her bed ; she laughs at the dream, and, merely regarding it as a curious fact, takes notice of the day and hour, to find that her son died at that very time, taking into account the difference of longitude.

Allowing for many strange coincidences, and for the frequency with which such dreams take place without any fulfilment, when, as Lord Bacon said, "men mark the hits and not the misses," there still remains so large a residuum of unexplained phenomena of this kind as to make it seem possible that there may be some physical cause yet to be brought to light to account for them. What if an atmospheric current still remains to be discovered, of which we cannot as yet even dimly conjecture the nature ? And if the researches of Matteucci and Du Bois-Reymond into the electrical relations of nerve, by showing that there are currents of electricity engendered in nerve as in other animal structures, which are actively circulating in it, should tend in the distant future towards the elucidation of this obscure subject ?

How, too, can we account for the many stories on record of dreams said to have completely changed the current of men's lives ? Was it that an unconscious change really caused the dream ? Or can a fugitive effort of will in sleep be stronger than its persistent efforts in waking moments ? Just as a person who is unable at all times in a waking state to overcome a nervous dread of danger of some kind, may yet occasionally gain the mastery over nightmare terrors in dreaming.

The mystery of dreaming is, after all, little lessened by slightly realising the manner in which the mind goes back to the past for its ideas in sleep. Nor is the greatness of the wonder diminished when we consider the countless thousands of distinct pictures in the mind—all in a latent state—and how closely the whole mysterious subject of the origin and growth of dreaming is interwoven with others equally obscure, as, for instance, the mechanism of memory, and the origin and nature of our intuitions.

WYMA.

ART. VII.—MATERIALISM AT THE INTERNATIONAL
MEDICAL CONGRESS.

BY J. M. WINN, M.D., M.R.C.P., &c.

ALTHOUGH the International Medical Congress cannot be said to have added much to our store of medical knowledge, it must be admitted that, as a social gathering, it was a great success. It is, however, to be regretted that there was one dark blot in its proceedings—the advocacy of *Materialism* by Professor Huxley, in his address on *The Connexion of the Biological Sciences with Medicine*.

Inasmuch as the Professor is one of the most strenuous supporters of materialistic doctrines, the title of his address is singularly inappropriate, inconsistent, and misleading. What right has he to adopt the definition of *biological* science, which wholly relates to *life*, when he ignores the *vital* principle? It would have been more candid if he had styled his address: An attempt to prove that all vital phenomena are the effects of mechanical and chemical forces.

No one can object to the prefatory remarks in the address, which have reference to the valuable aid medicine has derived from modern discoveries in physiology and chemistry; but this, however true, is not new, and is familiar to nearly every second year's student at our medical schools. When, however, the Professor leaves the beaten track of facts and gives utterance to the dogmatic assertion—that there is no contrast between living and inert matter—he makes the most glaring and egregious blunder. In speaking of Descartes and his followers he makes the following observations, which are unwarranted by those very modern discoveries in science for which he professes unbounded admiration: “Others, on the contrary, supported by a robust faith in the universal applicability of the principles laid down by Descartes, and seeing that the actions called ‘vital’ are, so far as we have any means of knowing, nothing but changes of place of particles of matter, look to molecular physics to achieve the analysis of the living protoplasm itself into a molecular mechanism. If there is any truth in the received doctrines of physics, that contrast between living and inert matter on which Biechat lays so much stress, does not exist.” If Professor Huxley had been thoroughly acquainted with the researches of Professor Lionel Beale and others on cell-life, he surely would not have proclaimed to the world the extravagant hypothesis that a living body is a mere piece of molecular mechanism; a theory which, he must be aware, if true, would tend to subvert the fundamental principles on which morality and polity are based. The following observations from Dr. Lionel Beale's *Lunleian Lectures on*

*Life and on Vital Action,** are diametrically opposed to Professor Huxley's view. After an elaborate description of biplastic movements, he remarks: "Of the several primary vital movements I have described, none can be initiated. They are peculiar to living matter, and not one of them has been explained by physical law. No mere physical or chemical attractions or expulsions, on the part of any material particle, at all resemble vital movements. . . . I beg you carefully to consider the evidence upon which the views I have advanced are based. It has been affirmed that the phenomena occurring in the simplest living matter, are not far removed from the phenomena of the non-living, and, like these, are to be explained mechanically, but only the *operation* not the *explanation* is forthcoming." We are not aware that Professor Huxley has paid special attention to microscopic investigation of living tissue, and are therefore not inclined to give so much credence to his haphazard remarks, as to those of Professor Lionel Beale, who has devoted a life-time to the patient observation of living tissue with microscopes of the very highest power.

About four years since Dr. Huxley expressed his belief that vital force is a sort of crystalline force. A crystal as much resembles a life cell as an icicle does a warm palpitating animal.

One of the most reckless assertions in the Professor's address, showing the unphilosophical haste with which he adopts fiction as fact, was the affirmation that "living matter differs from other matter in degree and not in kind; the microcosm repeats the macracosm; and one chain of causation connects the nebulous original of suns and planetary systems with the protoplasmic foundation of life and organisation."

It would have been more in accordance with sound philosophy if the Professor had waited till the nebular hypothesis, which is at present *in nubibus*, had been proved, before announcing it as a fact. We have not the slightest desire to check scientific inquiry, but the vice-president of the Congress surely might, for the sake of humanity, have paused before giving the weight of his authority to visionary, extravagant, and *unverified* theories of a decidedly atheistical tendency. The subtle sophistries of his school are doing infinitely more mischief than the outspoken blasphemy of Bradlaugh.

It is a marked feature in the constitution of the Professor's mind, that he is always in such hot haste to propagate fanciful speculations. The speedy collapse of his theory—that sea-mud and biplasm were identical—should have been a warning to him to be more cautious for the future. His notion also that

* *On Life and on Vital Action.* London: J. A. Churchill, 1876.

a living organism was the same as a crystal, to which we have previously referred, is another example of the mode in which he is carried away by his imagination. Moreover, he still persists with a pertinacity worthy of a better cause, to uphold evolution (that modern figment of science which the Rev. F. O. Morris, the distinguished naturalist, has happily termed "The Darwin Craze"), after the innumerable unanswerable objections which have been advanced against the hypothesis; the chief of which I published in my "Collapse of Scientific Atheism,"* and which, to any but a prejudiced inquirer, must have shown incontestably that Darwinism is played out.

At the Congress, Dr. Bastian's attempt to revive the exploded materialistic theory of spontaneous generation, was a complete failure.

In the Physiological Section Dr. Ferrier exhibited two of his uselessly mutilated monkeys, to show that injury to particular parts of the brain will produce paralysis, which might have been taken for granted without vivisection. As regards the localisation of the moral and intellectual faculties in the brain, Dr. Ferrier is no nearer the goal than he was six years since. The dog exhibited by Professor Goltz, and from which he had removed the greater portion of its brain, afforded evidence opposed to the views of Professor Ferrier. Inasmuch as a dog is a more intelligent animal than a monkey, we are inclined to give our vote in favour of the dog.

Since the above remarks were written, the British Association for the Advancement of Science has held its annual meeting at York. Its proceedings fully bear out the character I gave of it last year in *The Journal of Psychological Medicine*. I described it as a gigantic pie-nic, enlivened by sensational addresses on materialistic philosophy, and that it might be not inaptly termed: An association for the advancement of infidelity. In their recent addresses, Dr. Huxley and Sir John Lubbock have done their best to maintain the materialistic character of the association; and it is a great misfortune that its members should allow these gentlemen to take the lead in its proceedings year after year. Their scientific fallacies would matter little, and they might be safely left to the sobering influence of time, had it not been for the baneful influence they are exciting on those younger members of society, who have neither leisure nor opportunity for the study necessary to enable them to perceive the shallowness of the pernicious and

* *The Collapse of Scientific Atheism*. London: David Bogue, 3 St. Martin's Place, W.C. 1880.

fallacious doctrines, so loudly espoused by Drs. Tyndall and Huxley.

The president, Sir John Lubbock, in his address endeavoured to make it appear that the difficulties of the Darwin theory were more and more being overcome. This we most emphatically deny. Even his protégé, the industrious ant, rises up ungratefully, in arms against his patron. Sir John has taken great pains to endow him with the attributes of the human mind, but he did not see that in doing so he was breaking the ingenious chain which was to link the anthropoid ape with man. Sir John admits that, although the anthropoid ape approaches next to man in bodily structure, the ant claimed the next place to him in intelligence; therefore, inasmuch as mind is superior to matter, it happens after all, that it is not the monkey but the ant who is our immediate progenitor: if not, man must be a cross between the ant and the baboon, or, as a late popular novelist might put it: In the morning of life the industrious married the grotesque, and their offspring was the human mind. This is only one of the many absurdities which follow in the wake of Darwinism. But we are indebted to this intelligent creature, the ant, not only for his refutation of the evolution theory, but also for his having afforded an argument opposed to the views of Dr. Ferrier, and other materialistic physiologists. If, as they assert, a brain of complex structure is necessary for the manifestation of intelligence, how is it that the ant, with a simple ganglion, large only in proportion to the development of the eyes, *antennæ*, &c., is so much more intelligent, as Sir John Lubbock contends, than the anthropoid ape?

Professor Huxley in his address on "The rise and progress of Paleontology," bandied the old arguments in favour of evolution, without attempting a reply to the numerous objections to it. The only inference we can draw from his persistent reticence, is that he cannot answer them.

In the Zoological department, Miss Becker expressed her displeasure that the meetings of the association had been described as huge pic-nics. She evidently prefers sensational addresses, like those of Dr. Huxley's, which draw well, to sober sensible discourses such as Mr. William Spottiswoode's. It is a notorious fact that sensational lectures with a spice of wickedness in them attract the largest audiences. We have no doubt that if some one were to announce an address entitled "The existence of a Deity disproved by the spectrum analysis," or something equally impious or absurd, that the draw would be immense. There is nothing like *ad captandum* atheistical rhetoric to attract a thoughtless crowd.

ART. VIII.—VISUAL DISTURBANCES EXPERIENCED.

BY A FORMER MEDICAL SUPERINTENDENT OF THE INSANE.

THE subject of the following illusions, after six months' unheeded warnings, broke down about two years ago from heart disease.

At first, and for about two months, it manifested itself chiefly in attacks of angina pectoris, which were specially neurotic in character.

These were followed by gradual general improvement, but leaving the subject of them open to recurrent attacks, and especially liable to suffer from physical or mental exertion.

This condition of improved, yet impaired health, continued till the spring of this year, when the writer became the subject of what may be called an attack of acute dyspepsia, during the development and persistence of which occurred the phenomena of which the following notes are an imperfect record.

The attack referred to was indicated mainly by intense thirst, a foul tongue, bad taste, loss of appetite, persistent constipation, loss of sleep and mental exaltation.

The notes were sent to a medical friend during convalescence, but were certainly not intended for publication, which, however, has been assented to on the advice of others. They embrace a period of nine weeks, three of which, however, are a blank, as the phenomena then were too complicated and confused, and the writer too ill to analyse or remember them. During the two last weeks of the period they were too vague to be worth noting.

They have been re-read, but left nearly in the condition in which they were at first recorded. As the attack was followed by considerable prostration, during which was penned the description of the unusual phenomena, it is neither so lucid nor so vivid as otherwise it might have been. After all, only salient points are recorded.

I. Visual disturbances first noticed.

(a) Flashes of light.

These were similar to so-called summer lightning—sudden faint flashes of light, seen, however, in daylight, which involuntarily drew attention to the sky and the clouds. It was only by careful observation that they were made out to be subjective. The moment attention was directed to them they ceased to exist.

(b) Zones of light.

This was a more advanced, and therefore more persistent condition. On looking at a cloud a yellowish zone of light surrounded it, or a portion of it, which persisted only for a short time, but long enough to determine its source and reality. The area within the zone seemed a little darker than the cloud itself.

(c) A dark central area.

This, as seen, presented a dark circular field, which increased in darkness until the ground became broken up into a mass of black minute moving objects. In form they were stellar cruciform, or exhibited some irregular polygonal outline. In size they were $\frac{1}{6}$ th to the $\frac{1}{3}$ nd of an inch. In number, say a thousand. In colour, black. Their motions rapid—a veritable dance of atoms. They had very much the appearance of a swarm of animalcules on the field of the microscope.

The above series of phenomena were introductory to those which follow. They were most marked when looking into diffused daylight. They lasted for about ten days. They regularly succeeded each other, each gradually increasing in intensity, then declining and merging into its successor.

II. Disturbances which occurred after a three weeks' interval. They are described when they are supposed to have reached their greatest intensity.

(a) The gas when burning looked like a jet of electric light.

(b) The fire like a reservoir of melted metal at white heat.

(c) Daylight a brilliant haze.

(d) The sun was too bright for even a venturesome gaze.

(e) A page of print looked exactly as if a strong brush had been dashed through the paper, leaving the words and letters broken into fragments. As the fragments were dissociated from each other only within narrow limits, by a special effort of attention a word, or even a line, could be made out, but reading was impossible, and for many weeks the writer was deprived of his main solace during the previous eighteen months' forced retirement from active work.

The *disjecta membra*, verbal and literal, were confined to the centre of the visual area, outside of which the rest of the page was a vague confused mass.

(f) On looking into the open day nothing was seen but a confused haze, in the centre of which fragments of objects could be seen very much as the words and letters referred to. Here, as there, by a special effort of attention they could be made out more distinctly.

III. Phenomena which are still more complex and peculiar.

(a) Looking at the ceiling in the dark, or with the eyes shut,

it matters not which provided light be absent, a dark form is seen, representing the shape of the human eye enlarged, that is, a spheroid, with its longer axis horizontal, apparent size a foot to 18 inches, the central third of which corresponds to the central axis of vision. This is a dark grey oval plane, on which is seen a moving for min soft bright silvery light. The nearest comparison to it which I can think of is the frilled border of a lady's cap, or much better, a piece of intestine. In the latter you have the convolutions extending along one side, on the other a puckered line. Suppose this laid on the plane referred to in a circle, the puckered line towards the centre, the convolutions looking away from it, the central third of the area being free. The white glistening appearance of the intestine, as well as its outlines, presents as nearly as possible the phenomenon described.

It has, however, not only form and colour, but motion. This motion is continuous, and very peculiar. The circle of convolutions move slowly and regularly backwards and forwards towards the centre, but never reach it. The whole circle does not move at once, but successively in three or four sections. They invariably left the impression that they were the result of some regulated piece of mechanism.

This vision lasted for many days and nights, seen with eyes open or shut, best seen in darkness; even in daylight it could be made out, though indistinctly; in short, it was evidently persistent, though it ceased to become an object of consciousness when attention was strongly directed elsewhere.

Like all the other phenomena it gradually declined in intensity, and merged into others; however, even when others had taken its place and had become more prominent, it could still be traced as a shadow.

(b) Another figure which succeeded this was entirely different. Its form was that of a rayless composite flower, say a Michaelmas daisy. It was about $\frac{3}{16}$ ths of an inch in diameter. The centre was filled with a golden flame colour, surrounded by a narrow, somewhat irregular black line or border.

Whenever the attention was directed to it the golden centre became gradually filled with black points, which passed into rapid motion, then it gradually faded into darkness.

This vision lasted for two or three minutes, was constantly seen in darkness or with the eyes shut, but only imperfectly in light. It lasted for a period of about ten days, when, like others, it gradually declined in vividness till it disappeared.

IV. Another vision, or rather series of them, still more extraordinary, presented themselves as figures of living creatures. The larger mammalia wild and tame, birds, serpents, and fishes.

They seemed to occupy the same relative position to the central axis of vision as the intestinal circle already described.

(a) As to their forms, they were only *partial*, that is, only a portion of the figure was visible, viz., the head and shoulders. They were not only partial, but *imperfect*, that is, the forms were always distorted, just enough of regularity left to ensure identification.

(b) In position their heads were always towards the centre.

(c) Their numbers were four to six standing in a circle.

(d) Their motions, as in other cases, were slow, deliberate, see-saw, not altogether, but successively in sections to and from the centre, but never reaching it.

(e) The same set of figures always appeared together, and continued for a day or two, when they were succeeded by a new series.

V. Another series may be described as follows :

When the room was dark, or the eyes shut, the whole area of vision, not the centre merely, as hitherto described, was occupied by a black ground, on which appeared, as if painted, a series of geometrical figures as lines, angles, in flame or gold colour. They had very much the appearance of Japanese paintings minus, however, all organic forms.

This appearance gradually faded away as improvement progressed. The forms remained the same, but the colours gradually grew fainter, the dark ground becoming lighter, the golden patterns passing into dull yellow, salmon, and various shades of grey.

VI. Eccentric Phenomena.

In looking at an object in the axis of vision we see it directly and distinctly, but are at the same time indistinctly conscious of other objects lying in an outer circle.

The preceding series of phenomena were confined to, or at least most prominent in the central area of vision ; the fifth, just described, occupied the whole field, outer and inner ; that which we now proceed to describe was confined to the outer circle.

The centre in this case was dark and unoccupied by objects of any kind. The outer circle was filled by what can only be described as exactly resembling the ordinary patterns seen in wirework. These varied from time to time, each new pattern succeeding a former one, while within the meshes of the network the animalcular forms already described continued vigorously their atomic dance.

VII. Special Phenomena.

We may here add that visions of a more pleasing if not more interesting character sometimes, though rarely, made their appearance. They were entirely scenic, as distant towns, seas, lakes, cliffs, mountains, &c. They were always single pictures,

and were never repeated, as was the case with the other visions described.

As to an explanation of these phenomena, the writer has nothing whatever to say. His object has been to record and describe the facts as truthfully as he was able, and he begs now to conclude with a few general observations which he thinks worth noting.

1st. The absence of colour.

Black, white, and flame colour, that is modifications of natural or artificial light, were characteristic of all the phenomena, the more intense passing into fainter shades as the successive visions gradually declined.

On only two or three occasions were colours seen, and these faint and transient, as a pale pink, a light blue.

2nd. There is the rarity of single pictures or objects, these only occurring a few times and within the limits of two or three days, apparently just when improvement had begun.

3rd. There is the gradual growth, perfection, and decay of the successive visions as they gave place to or merged into one another.

4th. Another characteristic was the persistence of the declining phenomena after their more marked and vigorous successors had taken their place. This was constantly noticed. Sometimes three successive visions could be made out at the same time, each appearing more faint according to its distance in time. When so seen they were never mixed up irregularly, but appeared as occupying successive strata, leaving the impression that they were really persistent, but lost to view by the successive additions made by their more recent and more vigorous companions.

5th. The deliberate, regular, machine-like motions, as well as their repeated similarity in this respect in the successive visions, is another interesting characteristic.

6th. There is the position the various phenomena occupied relative to the axis of vision. By far the greater number presented themselves in the centre of the visual field where objects are seen directly and distinctly. A few only occupied the external area where objects are seen indirectly, as the zones of light and the wire-net phenomena. Fewer still occupied the whole area, as for example the Japanese figures.

In conclusion, as to the eyes themselves, no change was noted in the body of the eye external or internal, no pain was felt nor discomfort experienced except what arose from a tendency to lachrymation. This tendency was especially manifested during the later stages of the disease, and continued for about a fortnight after visual disturbance had ceased, and when convalescence was far advanced.

J. G., M. D.

ART. IX.—LEGAL MEDICINE IN FRANCE.

THE following are interesting as fair typical examples of the manner in which reports are furnished by medical men in France regarding the mental condition of individuals placed under their observation ; and they will be found, upon examination, to leave very little to be desired. The cases in question happen to be of particular interest, and we bring them before our readers as an introduction to the third, and more important article, a medico-legal review of the numerous cases judged and dealt with by the French Courts of Assizes (during 1877), which have reference to mental alienation or nervous disorders. The suggestive nature of the latter article will be increased by consideration, in connection with it, of the present state of legal medicine in this country.

ARTICLE I.—Report on the Mental state of Dominique Watrin, accused of an attempt to murder. Irresponsibility. Order for his discharge. By Drs. Giraud and Christian.

WE, the undersigned, Dr. Jules Giraud, director of the asylum of Maréville, and Dr. Jules Christian, chief medical officer, requested by the Judge of the tribunal at Nancy to examine the mental state of the above-named Watrin, accused of an attempt to murder, have upon oath, soul, and conscience, written out the following report, after having investigated all the details of the procedure, and examined the delinquent :

The Fact.—MEMORANDA.—On November 6, 1877, Dominique Curé, carrier at Saizerais, had come to Pont-à-Mousson, about half-past seven in the morning. After having completed his business he had started again about ten o'clock. Curé was in a cart, which he drove himself; he was accompanied by his daughter, aged fifteen, and by Lévy, a young man of seventeen, from whom he had bought a horse. When they had arrived at the forges of Pont-à-Mousson they saw an individual on the road who was armed with an iron spade, and who called out to them to stop : “If you don't stop you will be killed,” he said. They paid no heed to these words, thinking they had to do with a drunkard, and continued on their way.

The individual, however, began to run after the cart, which he reached again by the match factory. He first of all appeared

at the horse's head, but then ran to the back of the cart, climbed upon it, and, after having taken Curé's cap off, struck him five or six blows upon the head with his iron spade. Curé fell down bathed in blood. The young girl, who tried to defend her father, screamed, and some workmen ran to help; she was, however, also wounded in the struggle. The murderer was then arrested, without making the least resistance. But when his victim had already fallen to the ground senseless, the criminal dealt him two further blows. When Watrin was arrested he had 160 francs and a gold watch and chain upon him.

Such are the circumstances of the crime, as related in the depositions which the daughter of the victim and the persons who ran to her assistance made before the gendarmes, and before the Judge of the Peace of Pont-à-Mousson. Watrin did not in the least try to defend himself, nor to deny or excuse his crime.

To the judge he replied, "I own that I struck blows with the spade upon the head of the individual who was in the cart with his daughter; it is possible I may also have touched the latter. I know nothing about it."

And when the magistrate asked him the motive for this brutal assault, he said: "I did not ask his permission to ride in the cart, I told him to stop his horse. I struck him because he would not obey my order to stop. *I don't know the victim, I have never seen him.*"

The interrogation continuing, the culprit began to make departures from the subject, and to speak incoherently.

The next day, November 7, he appeared before the Judge of the Criminal Court, but in spite of the Judge's questions the culprit remained in absolute silence and immobility, so that the Judge was compelled to give up the examination.

The singular attitude and the strange manners of the culprit caused a suspicion immediately that his mental faculties were impaired, and the investigations made by the legal authorities have all confirmed this supposition. From the inquiry made by the authorities at Metz, it appears that Dominique Watrin was born at Noisseville on January 24, 1838; that he remained unmarried, and lived with his sister. The two possessed a house, some fields and vineyards, worth altogether about 15,000 francs (£600). Besides, he was said to have deposited some 3,000 or 4,000 francs at a notary's.

Mentally diseased for more than two years, he had never been dangerous. For the last three months, however, in his disease a bad change occurred. In July, and also in November he entered into the church with a hayfork to kill the curate. He had recently also behaved very violently towards other inhabitants of the parish.

The mental disease of Watrin had become so evident that his sister was obliged to have him watched and to keep her own eyes upon him as much as possible. Upon several occasions, however, Watrin had successfully deceived those who watched and had started across the frontier into France. Two of these escapades are related in a "procès-verbal" taken down by a special police commissaire of the station at Pagny sur Moselle.

About two months before the crime, Watrin had arrived at Pagny from Metz, by the train at 2 P.M., with a ticket for Nancy. The commissaire, who, through the strange replies he gave, concluded that his intellectual faculties were troubled, handed him over to the care of a gendarme, with the intention of sending him back to Metz by the first train. Watrin managed to escape and ran after the train for Nancy, at the risk of being crushed by an engine, then just passing through the station. The gendarme tried to recapture him, when Watrin made an attempt to snatch the gendarme's sword away from him, and he had to be thrown to the ground before he could be entirely mastered. He was by force placed in the train which left for Metz. At the moment of starting Watrin threw on the line all the money he had in his pockets, and screamed out that it was Prussian money and that he did not want it. There was just time to pick up what he had thrown away, and it was handed back to him.

During the night from December 5 to December 6 he came back to the Pagny station, and again a police inspector, finding that he had to do with a madman, led him on the road to Novéant, asking him to return home. This time again Watrin wanted to go to Nancy, where he hoped to obtain the post of "director of the Post Office."

Watrin went along the road which was pointed out to him, but a few hours afterwards he came back, and then went in the direction of Pont-à-Mousson. It is probable that he passed the rest of the night wandering on the road. However, he entered a builder's yard and there took the iron spade with which he struck his victim.

At the judicial inquiry the depositions of all the witnesses agree perfectly. Watrin is mentally deranged; he has been known and looked upon as such for a long time in his own parish and by all that had to do with him. Nay more, for the last three months his condition has become dangerous; he had threatened several people most gravely, he had committed acts of violence, and his sister had to have him watched. How is it to be understood that the authorities of the parish should not have intervened, that nobody should have thought of having the patient shut up, that he should have enjoyed perfect liberty

up to the very day when he committed an irreparable crime ? It does not lie outside of our duties as experts to deeply deplore this culpable negligence.

Direct Examination.—The direct examination of the culprit, which we continued for some time, has confirmed in every respect the results of investigations which we stated above : we were not in doubt for a moment that we had to do with a person really demented.

Watrin is a short, thin, wrinkled man, with a sly and cunning expression in his face. Since his entrance into the asylum his behaviour has been invariably the same. Concentrated within himself, not speaking to anybody, not seeming to heed in the least the other patients who surround him, he generally walks about with his arms crossed, making strange gestures, posing himself into various attitudes, and very often murmuring in an undertone some unintelligible phrases.

When he is under examination, he replies willingly, and his replies at first are tolerably correct. But as soon as the conversation is prolonged, or perhaps because it does not turn upon those points which preoccupy his mind most, he loses himself in interminable deviations and becomes incoherent.

Of this we have proof in the numerous conversations which we have had with him.

December 3, 1877.

He replies correctly to the questions with regard to his age, his birthplace, &c. We ask him whether he is married ; without hesitation he replies : Yes.

Q. What is your wife's name ?

A. Madelaine St. Paul.

Q. Is she from Noisseville.

A. Yes.

Q. Have you any children ?

A. No.

Q. Is your wife still alive ?

A. I don't know whether she is still alive, but when I left Noisseville, a month ago, she was still alive.

Q. Did you live happily together ?

A. She has chosen other men ; she eats and drinks with other men. I have seen her working with them in the fields.

Q. And you permitted her to do this ?

A. I gave her my permission ? Yes, to work with other men as she pleases.

Q. And you think this in order ?

A. She goes her way, and I go mine.

With regard to his marriage his replies are always the same, and equally senseless.

January 15, 1878.

Q. Are you married?

A. Yes, with Madelaine St. Paul; my wife is down there.

Q. Since when?

A. Since January 12, 1872.

Q. Did you live with your wife?

A. Our possessions have never been mixed, and my wife has never come to live in the house; I have never slept with my wife.

Q. Why not?

A. It is her religion to work with others, be it in the fields or in the house.

The truth is that Watrin is not married, and that he has never been married. Madelaine St. Paul is the name of his mother, and we may be allowed to suppose that a whole series of erroneous ideas are connected with this illusion about his marriage. A proof of this is that on the day when Watrin was arrested at the Pagny station he let drop from his pocket a paper which is before us, and upon which the following is written in the writing of the accused, in unshapely letters:

Je soussigné

Dominique Watrin,

Demeurant à Noisseville,

Département de la

Moselle, canton de

Vigy, né le 24 janvier 1838

et marié le 12 janvier 1872 et valeur d'un bien de 8000 francs meuble (word scratched out) transportés en chemin de fer jusqu'à temps pour avoir suffi jusque la mort.

Jules Watrin.

It will be noticed that in this piece of writing, which is incoherent, both the idea and the date of the marriage, as having taken place on January 12, 1872, occur again, just as he gave them during the direct examinations. This is the evident proof that this idea pre-occupied him, that it had with him assumed the character of a fixed idea.

Another series of ideas dominates him equally.

December 3.

Q. Why did you leave Noisseville?

A. Ah! that's for a reason; because the territory is overrun by the Prussians; because this cannot be arranged with the French power; because there is war; because the two powers cannot arrange matters; because there is a part, separation.

Q. But the war has been over a long time?

A. Ah! I believe in 1869, down there, in the month of August, or September, I am not quite sure.

Q. Were you not in the war?

A. No; I was at Metz during the time of the siege.

Without cessation he returns to this war of 1870, and, although whatever he says about it is confused and unconnected, yet it is easily seen that it constantly preoccupies him.

He imagines that it is his business to arrange the line of demarcation between the two States, and that is the cause, he says, why he struck the carrier.

December 3.

Q. Why did the gendarmes arrest you?

A. Ah! that was because I have stopped a man with a cart. He would not stop; then when I saw that I struck him some blows with a spade, and I left him three-quarters and a half dead. Some people came, and they seized me, and fastened me, and fetched the gendarmes.

Q. What had that poor man done to you?

A. He had not obeyed my commands.

Q. Had you then the right to command him?

A. Yes, because I am upon my French territory and he was a Prussian. He would not obey; it is to establish laws, so that railways, commerce, everything may go on between the Prussian power and the French power.

On January 15 his replies are almost identically the same:—

Q. You know what you have done?

A. Yes, I have dealt some blows with a spade to a poor man on the road from Pont-à-Mousson to Nancy. Poor man! I nearly killed him three-quarters and a half.

Q. What had this man done to you?

A. He had not done me any harm. It was, as I told you, to create laws between Prussia and France.

Q. You know that you run the risk of being sent to the galleys?

A. Yes, Monsieur le Médecin: the galleys, be shot or guillotined for having struck this poor man. You are the master. You hold my judgment.

Q. You do not feel sorry?

A. Yes, M. le Médecin, yes. But, *que voulez-vous?* France has to make an arrangement with Prussia, and every day the wine or corn vans would be broken.

In all our conversations, and hardly any days have passed without our speaking to him at the time of our visit, Watrin gave us the same identical answers. In a letter which he wrote to his sister upon the occasion of New Year's Day—a letter which we asked him to write—it is again the idea of the rôle of arbiter which he is to play, which reoccurs:

NOISSEVILLE: le 7 Janvier 1878.

Chère Parente,

C'est pour vous annoncer de mes nouvelles, que j'ai partit de Noisseville et sur la route de Pont-à-Mousson à Nancy, j'ai meurri un homme et je l'ai tué a 374 et demi et de là est on m'est conduit en prison ou j'ai souffert la faim, et si vous pouviez faire mon changement et me créer un demeure meuble et immeuble pour travailler jusque le bout et c'est pour séparer la France d'avec la Prusse et je vous souhaite touts et toutes une bonne année.

Discussion.—After all that we have said, a few words will suffice to characterise the mental state of the culprit. It seems to us indisputable that Watrin is really demented, and we have the evident proofs of this in his words, his writings, his action, in the whole of his manners and ways for more than two years. It seems to us even extremely probable that Watrin is under the influence of a hereditary predisposition to mania, and that all his life he must have behaved singularly and strangely. But this is only a supposition on our part. What seems to us more certain is that the outbreak of the mania dates back more than two years, and if this outbreak has not been directly brought about by the events of the war, it cannot be denied that these have deeply shaken Watrin's intellect, and have given its true character to his delirium. All the delirious ideas of Watrin relate to the war or the consequences of the war, the annexation of his country to Prussia, and its separation from France; although we must own that these ideas have to-day not that amount of distinctness which they no doubt possessed at first. Watrin has arrived at the chronological period of his mental disorder; he tends towards incurability; the ideas, instead of being enchain'd in a logical manner, are dissociated, incoherent; the pre-occupation which he shows with regard to his fortune is mixed up with ideas of his marriage and with those which are suggested to him by the eminent rôle he believes himself to be destined to play. These latter ideas yet dominate the delirium, inspire his actions, and direct his conduct.

We must remember this disposition of mind if we wish to explain the crime committed by Watrin. He leaves his village upon several occasions to come to France: at last he succeeds in the night from November 5 to November 6. There he has accomplished his object; now he is going, as he says, to establish laws between France and Prussia, and to try to have them executed. Armed with a spade which he has taken from a timber yard, he places himself upon watch on that road to Pont-à-Mousson, under the idea that he will see enemies arrive, and that he must needs make them do his bidding by force.

He speaks to the first passer-by. It is the unfortunate Curé. He commands him to stop. Why? Because he takes him to be a Prussian, because he will not have him drive about on a road where he thinks himself alone master.

The rest is known. Watrin shows no sorrow for the crime he committed; he cannot be made to understand that he had no right whatever to give any commands at all to Curé. On the other hand, he owns quite naively that he has never seen his victim, that he does not know him, that he could not be angry for what he had done to him; but he does not hesitate to add that he was in his good right, and that Curé ought to have stopped at his first word of command. And certainly Watrin would have acted in exactly the same manner towards any other person whom accident might have led into his presence. Without hate, without rage, without any provocation, he strikes the first comer, simply because he does not obey his words. This is the act of a madman which it avails nothing to deplore to-day, but which would have been very easily prevented if, according to the rules of the commonest prudence, Watrin has been placed in an asylum from the moment of the outbreak of his disease, or at least from the moment he began to commit acts of violence.

We conclude :

1. Watrin is insane.
2. His mania dates several years back; it makes him quite irresponsible with regard to the crime which he committed on November 6, 1877, upon the person of Curé.
3. Watrin is a dangerous patient. It is important, with regard to public order and the safety of the public, that he should be detained in an asylum for the insane.

(Signed)

J. GIRAUD.

J. CHRISTIAN,

Reporter.

Maréville, Feb. 2, 1878.

These conclusions being adopted, Watrin was placed at the disposition of the administrative authorities, and by an order dated March 1 was sequestered at Maréville.

ARTICLE II.—*Report on the Mental Condition of L—(Pierre-Marie), accused of striking and wounding his father. Chronic Alcoholism. Order for his discharge. By Drs. Delacour, Bruté, and Laffitte.*

We, the undersigned, Delacour, Director of the Medical School of Rennes; Bruté, Physician to the House of Detention; and Laffitte, Medical Director of the Asylum for the Insane of

Rennes, have been requested by the Judge of the Civil Tribunal of Rennes, on the 15th May, 1875, to examine the mental state of the above L—— (Pierre-Marie), accused of striking his father and inflicting wounds on him. Having been duly sworn, having requested communications on, and taken notice of all the documents relating to, the case, we have examined the delinquent upon several occasions, sometimes together and sometimes separately; and have made all possible inquiries and collected such information as could by its character bear upon the subject, and we have written out the following report :

On the 30th March last, about two o'clock in the afternoon, the said L—— (Pierre-Marie), who lived with his parents at Thorigné, went into a field where his father and his sister were already at work. When he got there he made some observations with regard to the work in a tone of bad humour; but as his father left him entirely to do as he pleased with regard to it, he began to work in the same way as his father. Hardly ten minutes had elapsed when suddenly, without a single word having passed between them, L——, who was standing behind his father, struck him violently on the head with the tool he held in his hand, and while the sister and a servant, who was near by, assisted the wounded man and led him home, L—— ran quickly away. Nevertheless, he returned the next morning to his parents to fetch his bootmaker's tools, and approached his father at the moment when the latter was dressing the wound he had received on his head. Somebody having remonstrated with him regarding his act of violence, L—— replied calmly: "It's not worth while talking about so little." Then he left the house and proceeded to Cigné, where two days later he was arrested in a coffee-house.

The behaviour of the delinquent in prison, and the information which has been gathered on his account were such as to cause a suspicion regarding the integrity of his faculties; we were therefore deputed to visit the culprit and to give our opinion regarding his mental condition and respecting the degree of responsibility which may be attributed to him. Here is the result of our examination :

L—— is twenty-seven years of age, of tolerably good constitution, and of nervous temperament; he has nevertheless a pale complexion; on the whole he seems to be in good health. His head seems to be well shaped, without any appreciable deformity; the expression of his countenance presents nothing particularly remarkable, although his look is a little vague; yet it betrays no embarrassment when he is being looked at fixedly.

If he is made to hold out his arms horizontally, the fingers

show a fibrillous trembling, which is easily noticed; if his tongue is examined it appears likewise that it is the seat of fibrillous oscillations, which, however, are very much less marked, and are, so to speak, intermittent; on the whole surface of his skin analgesia exists; he may be pinched or pricked without experiencing the least sensation of pain.

This young man appears before us without being either embarrassed or inconvenienced; he replies to the different questions which are put to him with regard to his name, his age, his profession, or about the various incidents in his life before the war of 1870. The majority of his replies on these points are not precise, the dates are only approximate. We cannot get positive and precise information from him with regard to the period when he left military service during the war, nor respecting the motives of his leaving the service; neither can we get from him any clear account or reason for his frequent changes of residence before the war, when he worked as a shoemaker. He then tells us, without being able to give the exact date, the circumstance for which he was imprisoned. His father having insulted him, he struck him, not with the hoe, but with his fist. When we express our astonishment to him that a son should thus strike his father, and try to make him understand the gravity of his offence and the punishment to which he might be condemned, he showed himself not moved in the least, and replies invariably and with perfect calmness, "He should not have insulted me—I would not have done anything to him," absolutely as if he considered the act of violence committed upon his father a perfectly natural one.

All these replies, however, are given with great indifference, as if he were not at all aware of the gravity of his situation. While he replies he scratches his head, raises his arms, and yawns. On one occasion he interrupted himself, without any affectation, to ask the keeper to change his clothes; another time he asked leave to go away. Recently he wrote a letter to his father, and, without even mentioning the misfortune which had befallen him, he asked him for money to buy nourishment and cider.

The results of the examination are therefore :

1. That L——, from a physical point of view, shows a fibrillous trembling of the muscles of the fingers and the tongue, and analgesia of the skin, disorders of mobility and sensibility which, considering his antecedents, are sufficient to characterise an alcoholic intoxication, consequent upon former drinking habits.

2. That L——, from an intellectual point of view, and as regards moral sensibility, shows by a sort of depression of

faculties apparent in the weakening of his memory, of his judgment, and in the slowness of his understanding, the almost complete loss of affective sensibility, besides manifesting absolute indifference and unconsciousness of his situation. In fact, L—— behaves in prison just as if he were at home, and as if he were not under the weight of a grave condemnation.

In this situation certainly, to speak only of the actual moment, we do not hesitate to consider him irresponsible, but this is not sufficient; it is necessary to examine the mental condition of the culprit before the perpetration of the criminal act, and at the moment when he committed the crime.

Of numerous statements collected in the documents relating to this case—statements which, by the way, all agree in describing L—— as a drunkard and as a dangerous and wicked lunatic—we shall only retain one, which is found in the *procès verbal*, taken down by the gendarmerie on May 10. The facts which are stated there are so characteristic that they suffice by themselves to fix in the most definite manner our opinion with regard to the mental state of L—— before and during his criminal attempt.

The *procès verbal* states: “One evening last winter, about 8 o’clock, L—— was seized with a fit of mania at his parents’ house. He thought he saw fantastic beings under the furniture; he armed himself with a long perch, which he began pushing under the beds, chairs, and tables; at last he took a lighted candle and went up into the hay-loft to chase away some imaginary animal.”

This was certainly a sharp attack of well characterised alcoholic fever; in fact, patients attacked by this form of insanity see themselves surrounded by animals of fantastic forms, monsters, or serpents, which crawl on the walls or on their bedclothes, making grimaces at them; and sometimes they imagine themselves persecuted by enemies who want to kill them, &c. &c.: in one word, whether its seat is sight, hearing, or touch, the hallucination, in alcoholic mania, has always that characteristic of being of such a nature as to endanger the physical or moral safety of the person attacked by it, and to appear principally at night.

The delirium of L—— certainly presents all the symptoms we have just described.

The drinking habits of L—— being well known and proved, it can be affirmed that this is not one of those passing attacks of mania which sometimes occur as the result of alcoholic excesses in individuals who are not accustomed to hard drinking, but that it is indeed a case of alcoholic madness which occurs in habitual drunkards, who already show every symptom of chronic alco-

holism, when they give way to more abundant intoxication than usual; and this is proved in a perfectly undeniable way, since at the moment of our examination, more than five months after the attack, when he has already been in prison for more than two months and deprived of nearly all alcoholic drink, he still presents, as we have shown, disorders of mobility and of the intellect sufficiently great to characterise alcoholic intoxication.

Conclusion.

We may, therefore, conclude, remaining always on the standpoint of clinical observation, that the disease from which L—— suffers was continuous and constant in its existence, and that it dates back at least as far as that day when the violent attack of insanity came on, viz., last winter, and that consequently he was not in the possession of all his mental faculties at the moment when he committed the criminal act.

Rennes, June 6, 1875.

(Signed)

DELACOUR,
BRUTÉ,
LAFFITTE,

Reporters.

In accordance with these conclusions, an order for his discharge has been issued by the Judge of the Criminal Court, and L——, placed at the disposal of the administrative authorities, was removed to the asylum of Rennes.

ARTICLE III.—*Medico-legal Review of 1877.* By Dr. E. Marandon de Montyel, *Adjunct Physician to the Public Lunatic Asylum of Toulouse.*

THE law journals as well as the great political papers are generally full of crimes and offences committed by insane persons at large, whose insanity has been recognised and accepted by the magistrates. We shall not take note of all those facts, the medico-legal importance of which is relatively small, and we shall report only those which have resulted in some legal decision or judgment quite contradictory to the debates. Through the doubts which they have raised or the errors to which they have led, they are in reality more particularly worthy the attention of the student of legal medicine.

We believe we need not point out in detail the utility of a review of this kind. How important will it not be for the specialist in mental diseases to find collected in a widely circulated periodical all the litigated cases relating to his speciality, which have played before the Courts of Assizes and tribunals of France? As every year brings its new

contingent, we shall soon have a rich collection of interesting facts, which will much facilitate the labours of experts in future. The first idea of this work is not our own ; it is that of M. Moreau, of Tours, who began it here as far back as 1844, and continued it for several years. Although we do not possess the immense talent of the physician of Bicêtre, we shall yet give all possible care to this work, and hope not to appear too unworthy by the side of so great a master.

1st Trimestre of 1877.

I.—*Ambitious Lypemania.—Murder.*—On February 2, 1876, a man named Cadillac murdered the Abbé Puech, in the district of Aveyron. When arrested he admitted his crime, and declared he had committed it out of revenge. The niece of the Abbé had refused to marry him, and he accused the Abbé of having opposed the union desired by him. As Cadillac, in addition to these positive explanations, had made a number of other and very incoherent statements, the counsel for the defence at the June Assizes had, in spite of the indignant protestations of the culprit, asked for a medico-legal examination of his client. The court requested Messrs. Lala, Bonnefous, and Faucher, medical director of the public asylum of Rodez, to investigate the mental condition of the accused at the time of the crime, and to ascertain whether he was responsible for it or not. These experts arrived at the conclusion that he was irresponsible, and according to their depositions at the December Assizes we believe that Cadillac was really suffering from ambitious lypemania. They declared at the same time that he could not defend himself in a criminal accusation. According to the conclusions arrived at by the Secretary of State, the court declared that the proceedings in this case must be suspended until such a day, when at the request of whom it shall concern, documents can be produced proving that Cadillac is in such a mental condition that he can reasonably attend to his defence, discuss the charges brought against him, and adduce such witnesses as might seem to him to be of use in his defence. Cadillac was therefore provisionally placed at the disposal of the administrative authorities.

We have transcribed the declaration of the court in its integrity, as it seems to us to be of extreme gravity. It would be very regrettable if in cases of this nature, which are very numerous, the magistrates should get into the habit of first waiting for the recovery of patients instead of calling at once upon the jury to give their verdict, because indeed this recovery may not take place until after a very long time, if it take place at all, and during all that time the patient would remain under

the bane of a grave accusation and in the state of prisoner. Is this right? This course of action might be pursued if a culprit were to lose his reason during his examination, as long as he was in full possession of all his mental faculties at the moment of perpetration of the crime; such a course would, we believe, be indeed pursued in a case of that kind; but if as in the present case, the fact is established with perfect certainty that the accused was demented at the moment of the crime, what possible use can there be in waiting until his mental state may change for the better, and until he may be able to attend to his defence? What new elements bearing upon the case can by this be brought to light? Indeed we know of none.

II. Drunkenness. Seditious cries. Alleged insanity.—A man named Tissier had celebrated Christmas by copious drinking; he entered the Church of St. Roch during Mass, and suddenly he began moving his hat about in the air and shouting: "Vive l'Empereur." He was taken to the police station, where he showed intentions of committing suicide. His necktie having been taken away from him, he attempted to strangle himself with his shirt sleeve, but was fortunately prevented from doing so. Then he declared that he was not in his right mind, and that in 1871 he was for six months a patient at Dr. Voisin's asylum. He explained his insanity through a loss of 40,000 francs which had just befallen him. He was placed under the examination of M. Legrand du Saulle, who declared that for the moment he was not deranged any more than could be explained by his being intoxicated. These conclusions were accepted by the tribunal.

III. Detention of an epileptic imbecile.—If there are countries where imbeciles and idiots are looked upon as special gifts from Heaven and receive every care and attention, then there are also others where they are deemed no better than so many useless food consumers, beings which one cannot get rid of soon enough. A country of the latter description must be Normandy, if we believe a correspondent of the *Droit*. Whatever may be the general opinion, it is certain that on December 8 and 9, 1876, the following sad case was brought to light at the Assize Court of la Manche. Celestine Onfroy was a young imbecile and subject to epileptic fits, but according to the statements of all the neighbours she had never been malicious and was very fond of work. A rumour which got abroad regarding the bad treatment she received at the hands of her relations caused a judicial inquiry to be made. When the commissaires visited the spot it was found that the poor girl had been kept locked up for more than two years by her brother, his wife, and their daughter. The place where she was shut up

was a sort of old bakehouse, with hardly a roof upon it, so that wind and rain could easily penetrate. The bed upon which she slept was far too short for her. She was covered with vermin and her clothing consisted only of a few rags. The inquiry further proved that the poor creature had the marks of blows upon her; that she had not received sufficient nourishment and had, at the same time, been forced to do the hardest work. The medical officer who examined her found her to be in a state of great prostration. Thus this poor creature was tormented to hasten her death, so that her part of an inheritance might be seized. The two women were set free and only the brother was condemned to seven years' penal servitude.

IV. *Drunkenness. Murder.*—Drunkenness has its surprises, and an honest man with a mild disposition who gets intoxicated may, when he recovers reason, find himself a criminal. Bellenger, who appeared before the Assizes of Angers, in December 1876, learned this to his cost. This man, 34 years of age, carrier by trade, had irreproachable antecedents, except that, without being given to drinking, he liked to celebrate festivals at the wine shop. One night, coming drunk from the inn, he quarrelled with three of his companions and, drawing his knife, struck one of them several blows with it. He then ran away, while the others removed the wounded man; but after a while he stopped and waited for them at the corner of a street. There he again threw himself upon them and mortally wounded a second one. The excuse of drunkenness which the culprit gave to the jury was only partly admitted by the latter.

V. *Kleptomania. Theft.*—The case which we describe in the following lines proves that magistrates are still reluctant to believe in the existence of impulsive monomania, and that they still doubt the possibility of persons being almost against their will pushed towards dishonourable or criminal actions which they even know to be such; in this case everything was present that should have created doubt in the minds of the judges, and should have caused them, if not to order the complete discharge of the defendant, yet at least to direct a medico-legal examination. Madame de Kouvitchinski, who appeared before the judges of a police court in Paris, on January 27, 1877, belongs to a family of a certain eminence in Russia. Her income was 24,000 francs per year, and she was in the habit of purchasing goods in shops to the extent of 300 or 400 francs for which she paid in cash, and at the same time of taking objects without particular value and of which she had no need. Dr. Kortsakoff, who came expressly from St. Petersburg, declared that the lady belonged to one of the best families of that city, that she entered the best society, and that

never had the least unfavourable suspicion fallen upon her. He added that she was of a constitution which predisposed her strongly to certain pathological affections of the nervous system; that insanity was in her family and that her sister was at that moment under treatment for mental disease. Besides this statement the counsel for the defence read before the court a certificate from the pen of the celebrated Russian specialist for insanity, Dr. Frabenius.

Do not the particulars of this case seem to indicate that Madame de Kouvitchinski acted under the influence of an unhealthy impulse? Her system of defence consisted in putting the thefts upon the shoulders of her little girl, aged 6 years; but this surely proves nothing against her madness, because it is most frequent that the insane persons are perfectly well aware of the gravity of the offence thus committed by them, and that they try to push them over to others or to excuse them. We are daily witnesses of occurrences of this kind in our asylums.

The tribunal condemned Madame de Kouvitchinski to three months' imprisonment and 300 francs' fine.

VI. Alcoholism. Attempt to Murder.—The following case, which was judged by the jury of the Yonne, on December 16, 1876, happened under circumstances which were well calculated to throw doubt upon the real mental state of the culprit. Durville is an officer of the magisterial court and given to drinking strong liquors. Of a violent character, he has sworn to hate to the death the maire of the village, who in his *procès verbaux* had found some of his statements to be contrary to truth. He goes about everywhere and openly talks of his hate against this magistrate, and saying that after he has killed him he will kill himself, because he does not care for life. On November 9 he met the maire at the inn, surrounded by several of his friends. Under the influence of visible over-excitement he mixed himself up in the conversation with expressions of a nature to cause the others to ask him to retire. He replied by insults, and the magistrate thus outraged seized him by the arm and pushed him out of the door. Durville then proceeded to the coffee house next door and spoke in violent terms against the maire. At last he went away shouting that they would hear of him. He returned to his home, took his gun and said to his neighbour: "Ah, your maire! I shall settle him now." Then he returned to the inn, hid in a window niche, and, waiting for a propitious moment, fired upon the maire.

If we remember the old drinking habits of the delinquent; if we remark that instead of hating the maire, Durville ought in reality to have been grateful to this gentleman, who, finding

out some untrue statements of his in the *procès verbaux*, simply points them out to him when he could have had him punished ; if we take into account the incessant threats which he made before everybody, thus revealing the object he had in view ; also the ideas of suicide which he had pronounced and the state of over-excitement in which he was found, then we must indeed ask ourselves whether the alcohol had not caused cerebral lesions in this man, and whether he had not arrived at that point where one ceases to be a drunkard to become an alcoholic maniac. The jury understood that this attempt at assassination was made under peculiar circumstances, for they rejected the idea of premeditation, and admitted extenuating circumstances. Durville was condemned to ten years' hard labour at the House of Correction, and ten years of supervision by the police.

VII. Delirium of Persecution. Murder and attempt to murder.—In this case the three medical men charged with the examination of the mental state of the accused could not agree, and unfortunately the opinion which prevailed in the end was not what we consider to have been in accordance with the true state of things. The importance of the case, and the divergence of the opinions which were formed by the experts, justify the quotations which we think it our duty to make. The following is the account of the two crimes according to the documents of the accusation :—“ On September 19, 1876, Zoé Moulinos returned home about seven o'clock in the evening, coming from the fields. Hearing hasty footsteps behind her, she turned round and found herself face to face with her cousin Joseph Bernard, who at the same moment fired a gun at her almost at arms' length. Thence Bernard ran in all haste towards a barn close by, belonging to his aunt, the widow Moulinos. The accused opened the barn door violently, aimed at his aunt, fired, and then fled. He left the country immediately, and was apprehended only some time afterwards.” Bernard owned his double crime, and declared that he had obeyed to a thought of revenge—being tormented and persecuted by his aunt and cousin—and that he had fled from the country, not to escape the hand of justice, but to get away from all the hate which the two women had borne him.

The following is a part of his examination, which can leave no doubt as to the real condition of his mind :

Q. What was the opinion which you said you believed your aunt and your cousin had of you ?

A. They wanted to force me to sell my house, and they set Mr. M—— and his wife up against me. When I was condemned to pay an indemnity of 2,000 francs to these, I heard them say, “ He will be obliged to leave the country ; he is ruined, he will be put in prison.”

Q. But, before she died, your aunt said that she could not understand the motive which could have influenced you, and your cousin declares that they have never even spoken about you?

A. Yet I have heard them very well. Moreover, when I had bought my gun, they said that I had not paid for it, and that it would be taken away from me. The gendarmes came and searched my house.

Q. Yes, of course, they came and looked for you after the crime?

A. No; I was the object of their searching visits before, and I was persecuted by the gendarmes and the gardes.

Q. You speak of what happened after the crime as if it had happened before?

A. Not at all; because it was since my affair of the Thar that I was persecuted.

Q. What then was this affair of the Thar?

A. I had gone to the Thar to visit my sister, and before I went to her house I went to the notary, whom I had known at college, to get a legal document for my wife, and I heard him distinctly say to his clerk: "Go and fetch the garde, and I will retain him here."

Q. The notary denies energetically having said anything of the kind.

A. I heard him perfectly well.

Q. You told him then that you were going to see your sister, and that you would return after a moment, and you did not return.

A. No; after what the notary had said I left. When I got to the island, as I heard them say behind me that the gendarmes were following me, I got across the river Sorgues as well as I could. When I reached the other bank I saw a gendarme near the river's edge, and so I crossed it again. Further on I heard them say that the roads were guarded by the gendarmes and that I would be arrested. A woman said to a labourer: "That is the man from Venasque, whom the gendarmes are looking for; tell them that he came this way."

Q. You tell this story now, and you place before the crime what really happened afterwards.

A. I repeat that I do not.

This language is characteristic; such things are not invented unless one is well versed in the observation of the insane, and the learned doctor of Montdevergue was right in affirming that the culprit suffered from hallucinations of the sight and hearing, with monomania of persecutions. Of the two other experts, one followed Dr. Campagnac, while the third one declared that

Bernard was not insane and must be held responsible for his double crime. The jury unfortunately embraced this latter opinion, which then prevailed, and the accused was condemned to penal servitude for life.

VIII. Drunkenness. Murder.—Individuals given to drinking strong liquors are, at a certain period of alcoholic intoxication, not only subject to an extreme irritability which is aroused by a mere nothing, but they even often do not become aware of this irritability, and let themselves be carried to violent actions of which they do not see the consequences. The following is a case in point. The woman, Pauline Prudhomme, kept up intimate relations with the man Paulmier during the month of November, 1876. Both gave way to drinking, and hence had a great many quarrels. On November 17, Pauline went to the wine shop at 6 o'clock in the morning, where she met her lover. A dispute arose on a question of money, and Paulmier, striking his mistress, knocked her down to the ground and then kicked her with his foot. She returned home, but the drunkard followed her and continued to beat her until the neighbours, who were attracted by the woman's screams, interfered and stopped him. Paulmier then returned to the inn and said that he had just administered "a good hiding" to the woman Prudhomme, and that he had caused some swellings on her forehead which would prevent her from going out all that day; then, without showing the least emotion, he went to his work, perfectly unaware of having committed a murder. In fact, a few moments after he had left her Pauline died, and the medical man who made the autopsy declared that she had died from strangulation. Paulmier appeared before the Assize Court of the Seine accused of the crime of murder, and was acquitted on January 24, 1877.

IX. Megalomania. Theft.—During the last days of January, the Correctional Tribunal of Paris condemned to thirteen months' imprisonment, in spite of the defence requesting a medico-legal examination, the man Bertin, aged 21 years and married. This man, who cried like a child during the proceedings, had already been condemned for thefts, a first time to a month, and a second time to two months' imprisonment. Bertin seemed not to be in full possession of all his faculties. He told his wife that he was professor at a large college, and left every morning with a book under his arm to wander about in the fields all day long. The theft which brought him on the benches of the police court for the third time had been committed at the house of his father, a door-keeper at Paris. He had gone to him on January 16, the day of the term, and had taken away a roll of money containing

more than 3,000 fr. He threw away this money in the most senseless manner: thus, he invited the cabman who drove him to the station to dinner, and gave him 5 fr. as a *pourboire*; to the man who took care of his portmanteau he gave a *pourboire* of 10 fr. He invited to dinner everybody he met or that would accept, and paid for them all. If we add to these symptoms that during pregnancy Mdme. Bertin had a great grief, which endangered her life and that of her child, then we have a complete account of the mental state of the accused which cannot leave many doubts in our mind regarding its true nature. Were he not so young we would suspect in him the commencement of paralytic insanity. His actions indeed reveal a diffuse ambitious delirium, which has certainly the character of paralytic delirium; moreover we find in him the tendency to steal and a great weakness of character. Whatever the case may be the defence, in our opinion, was very well advised to demand from the tribunal a medico-legal examination.

X. *Delirium of Inventors. Poisoning with Prussic Acid in a railway car.*—This is the case of De Bouyn, who was tried in February 1877, by the Assize Court of the Bouches du Rhône, and was condemned to twenty years' hard labour. In our opinion De Bouyn was demented, and we hope that from this analysis it will be seen that this accused suffered from that variety of megalomania known under the name of "Delirium of Inventors."

In the case of De Bouyn there were hereditary antecedents of a pronounced character: two aunts and an uncle were insane. After having passed through all his classes, De Bouyn began studying mechanics and chemistry. He was not long before he thought himself called upon to make great discoveries, and eventually believed that he had invented a railroad with movable rails; a flying machine which was to entirely transform the art of warfare; a peculiar chemical composition which, when projected from the holes of a shield invented by him, would admit of suffocating at a distance, and without danger to himself, thousands of human beings. To all these splendid inventions he added the one not less beautiful—viz. that of making natural diamonds by a new process of crystallisation. Entirely absorbed by his discoveries, he occupied himself with them day and night, and would not give up his researches to procure for himself the means of subsistence. Without fortune, he lived at the expense of a widow, his mistress, who was very much taken with him and submitted to all his caprices. His rage for invention and experimentation was so great that he made this woman sit upon eggs in a room kept at a temperature of 25°, and did not permit her to leave them until they were hatched. This person states that he was often ill, of a very mild tempera-

ment, except when he was opposed in anything relating to his machines. He passed all his time making them and corresponding about them. He often got out of bed at night and said strange things. In 1873 he committed a theft, with house-breaking, at a factory. He was examined by two doctors: by Dr. Castellon, who considered his responsibility to be mitigated; and by Dr. Pontier, who declared him irresponsible. This last opinion was accepted by the jury, and De Bouyn was acquitted. Such was the man who, finding himself alone in a railway compartment with a companion, killed the latter with prussic acid while the train was passing through a tunnel, and then robbed him of his purse and various objects. During the progress of the case and the cross-examination, De Bouyn has given numerous versions of his crime. It is perfectly well established that the poisoning was committed by the accused, but we are equally sure that it was only the outcome of his insanity. He may have killed his travelling companion to experiment upon a man with regard to the effect of his destructive machines, or to rob him of the money necessary for the perfecting of his machines; he has acted under the influence of delirious conceptions, communicated to him by heredity. The doctors Lachaux and Rainpal, charged with the examination of his mental condition, have agreed upon a limited responsibility, as a consequence, as they said, of his temperament and his hereditary antecedents. We regret this, because we believe that in 1873 Dr. Pontier was right, when he declared De Bouyn demented and irresponsible; and it is to be regretted that after his acquittal he should not have been placed at the disposal of the administrative authorities.

XI. Perversion of affective sentiments. Murder of a child by its mother.—Is there a form of mental alienation in which the most prominent symptom—the only one which strikes those who are not accustomed to the observation of the insane—is the perversion of affective sentiments? Certainly yes. No doubt a specialist, who could study the patient closely, follow him about all day, would succeed at last in finding out wrong ideas, intellectual oppression, and, from time to time, real paroxysms of agitation which, as they are often short, would require an experienced eye for their detection; but all these pathological peculiarities would be passed unnoticed by persons inexperienced in psychiatric studies, and what would strike them would be that they would think themselves not in the presence of an insane person, but of a monster: this would be the effect of the perversion of affective sentiments. Was Madame Vilmont, who appeared before the Court of Assizes at Tours, on March 9, 1877, an insane person of this category? We cannot be quite

certain about it, for the information which we have gained from the law journals does not seem to us to be sufficient to form a positive opinion. Anyhow, the crime this lady committed upon her only child was perpetrated under such odious conditions, and the character of the accused is so extremely opposite to all that is natural, that it would perhaps have been prudent to have her examined by specialists.

In the night from January 21 to 22, Alexandre Vilmont, aged four years and a half, succumbed to the bad treatment he had received at the hands of his mother for the last six months. Up to the age of four he had been brought up by his grandmother on his mother's side. Every day his mother beat him, now with a stick, now with a rod, and with his father's boot-jack. The poor child had at last got so far that when his mother asked him whether he had had enough he replied: "Yes, mamma," and thanked her. He was almost continually locked up and left alone when his parents left their home, even for many long hours together; and if it happened that he dirtied himself under such circumstances, his mother would, in mid-winter, plunge him into cold water and brush him with a scrubbing brush. On one day she even put excrements into his mouth and asked him whether he liked it. The body of the deceased child was full of contusions. It was submitted to the examination of Dr. Danner, who counted more than one hundred wounds; one side was broken, on one of the toes an ulcer admitted of the bare bone being seen, yet, in spite of this painful wound, the mother obliged the child to walk for several hours every Sunday. At last death, which so many sufferings would necessarily have induced in a short time, had been brought about by a congestion produced in consequence of a blow on the head with a stick.

The mother who thus killed her only son by a cruel martyrdom of six months, had no serious motive for doing so; but ever since the age of puberty she had presented signs of a profound perversion of the affective sentiments. An orphan, she had been tenderly brought up by her grandmother, and she took a delight in tormenting her to such a degree that in the district a rumour got about that by her caprices and brutality she had shortened her days. Married, she tortured her husband, who was several times obliged to leave her, and at the age of hardly twenty-six years, she murdered her child in the manner described. Would a well-conducted medico-legal examination not have cleared up this mystery?

The jury shrank from the odious nature of such conduct. They admitted extenuating circumstances, and Madame Vilmont was sentenced to hard labour for life.

A careful consideration of all the cases cited in the preceding article will indubitably suggest the propriety of entirely recasting the laws under which irresponsible criminals are wont to be treated. In France, more commonly than in England, all the factors tending to the commission of crime are attentively weighed, and, as a result, to the credit, be it said, of French humanity, it frequently follows that certain penalties are not inflicted on the unhappy victims of diseased imaginations. In this country increasing importance is being attached to the question opened up in the foregoing pages, and especially is this due to the publication of Dr. Guy's instructive and valuable work "The Factors of the Unsound Mind." At the present time space forbids our further considering the subject, but we shall return to it again in as complete and exhaustive a manner as possible. [Ed. J. P. M.]

ART. X.—LORD BEACONSFIELD VIEWED PSYCHOLOGICALLY.

VERY considerable difficulty must always be experienced in attempting to analyse the character of any individual in whom, at times, widely different types of intellectual fitness for great works have made themselves evident. The labour of accurately apportioning the degree and importance of varying attributes of mind is ever one of considerable magnitude, and the danger associated with the undertaking is of that twofold kind from which the object of the attempt, and the one who makes it, will both be likely to suffer. Just as sympathy is engendered with efforts directed to personal exaltation, so is there a possibility of diminished interest being excited on behalf of those higher and nobler aspirations that are directed towards attainment of wider benefits than can be those of immediate advantage to the designer of them ; and it is, perhaps, a detraction from the best qualities the late Earl of Beaconsfield undoubtedly possessed in perfection, that, throughout his public career, self was a conspicuous factor in his creed. Whether we are justified, however, in regarding the proofs he has himself adduced of this predominant feeling as an indication, as some have not failed to urge, of psychical inferiority, may be advanced as a valid argument for discussion. It would be difficult to select any single historical name, and to say of its owner that his impulses were purely extra-personal ; or that even the most admirable of them had been directed with the sole aim of securing advantages for the enjoyment of others rather than himself. Judged from a standpoint of pure intellectualism, Lord Beaconsfield, no less than any who are worthy to rank with him, commands the utmost homage in our power to bestow, and homage, too, that is almost involuntarily tendered on account of a disposition which, if not invariably self-sacrificing, was, at least, at all times patriotic in the most inclusive sense of the word. Patriotism was, in all that he did or said, a foremost consideration with him ; his acts all tended to the fulfilment of desires that had for their first aim the advancement and consolidation of national greatness ; and how, with this fact before us, it may be asked, can we hesitate in bestowing frank and honest admiration for the determination which shone out in every attempt of his political life ? We do not intend in this place to pursue the

consequences of any of these efforts, but to view them only as indicating the lines on which his active mind proceeded, and as tending to show the motives actuating him. They are sufficiently a matter of common knowledge to render any recapitulation of them unnecessary, but it is worth while spending a few moments in striving to dissect the feelings and motives to which they were primarily due.

In pursuing this attempt we must reflect for a moment on what were the salient features that marked the mental character of young Disraeli; and forgetting the aspersions that have been so plentifully bestowed on him, it is not impossible to gather from his own words a good deal of enlightenment on the point. Ambitious he certainly was, but the ambition he displayed may not unjustly be taken as suggestive of his intense appreciation of the need for temporal power as a means towards performing works of general utility. He had a keen perception of the truth of this statement, and his earliest achievements exhibit him as one possessed of the idea inseparably connected with it. Moreover, he was speedily convinced that his devotion to mere business pursuits, however laudable in themselves, was little calculated to advance the aims even then held in view by him. Hence his speedy determination to eschew the limited field he thus early entered on for the wider arena of politics; and hence, too, the opportunity for hastily misjudging his ruling motives on the part of those who have striven to put a base construction on his endeavours. Except in the novels of young Benjamin Disraeli, we possess no means of estimating his thoughts at this period; but in these works there is abundant proof that he was fired with desires that ought to exact an unfailing tribute of respect. The high-flown expressions of youthful genius, it is true, cloak and obscure many of the nobler fancies the pages picture forth, but there is no blinding ourselves to the fact that high desirings are embodied therein. It was the author's belief that the world's work could be accomplished through the world's help, and this assistance he resolved to gain in order to fulfil the lofty mission defined in his own mind for himself. The mode of gaining that aid lay clear before him, and that mode was to command it. He must have seen the difficulties that beset his path—indeed, we know they presented themselves in full force to him—but it is honourable to him that we can now declare they availed nothing to deter him from opposing them. But though he failed again and again, and yet again, to realise success at first, he never quailed before the appearance of impregnability presented by the obstacles he encountered. Mere hopes and personal aggrandisement would never have carried him so far in an apparently

hopeless struggle, and though he might perhaps himself have sanctioned the explanation that *amour propre* incited him to renew his efforts, yet we are able at this time to afford a more exalted and a more fitting reason for the continued battle.

It is undoubtedly dangerous to venture on the ascription of noble impulses to one who figures after all as more or less of an adventurer, but the proceeding is eminently justified in the case of Lord Beaconsfield. By a multiplicity of golden deeds he has repeatedly shown that mere self-desirings were never properly attributable to him; even in those positions where he had most the appearance of seeking his own individual advancement, careful examination of the motives guiding his conduct reveals that this was the outcome of suggestions prompted by other than personal aims. And so entirely throughout his life can this be said of him, that it will be profitable to inquire in what particular his special intellectual constitution contributed to bring about the result. As we have hinted, the patriotic sentiment largely influenced him; but it is necessary to somewhat qualify the word as here employed, that it may include, outside and beyond love of country as being the home of adoption, an absorbing desire also to demonstrate the wisdom of that country's trust in an alien race. Moral consciousness of his position, and inherent national desires, combined to make young Disraeli supremely anxious to vindicate at once the claim of his people to respect, and his individual claim to be the exponent of its deserts. Accepting this view of his motive, we can trace its action on all the notable performances of his life, and everyone must also admire the persistence with which he ever held it before him. The taint of greed can have no right of association with the qualities which distinguished him, nor have we any means of showing that such an ill-feeling ever animated his endeavours, either publicly or privately, to advance the views he entertained. Thankless though the course may be, and is, to refute indefinite charges of this kind, the freedom with which they have from time to time been cast abroad, calls for some defence of their object. In many ways might he on frequent occasions have pandered to a craving for temporalities, had it existed. Disraeli's mind, however, could not bring together two ideas so different as are those of mere personal gain and national progress. In forwarding the one he pursued his life's ambition; of necessity he advanced along with it, and it is the triumph of his life that we can say of him his own glory was a reflection of that shed through his influence on the country he so devotedly served.

Lord Beaconsfield was essentially a man of extreme intellectual activity. In some respects he thus bore resemblance to

his illustrious political opponent, the present Prime Minister ; but in all that emanated from his mind there was the stamp of a philosophic spirit rather than the mark of laborious production, which distinguishes the mental character of Mr. Gladstone. Even in the most trivial utterances Disraeli always succeeded in concealing a thought or an idea, examination of which repaid the time spent in it ; and in his finished pictures we all recognise, and unfailingly admire, the skill and subtlety of the man of genius, and the philosopher of social life. In his own analysis of character and aims, such, for instance, as are to be found in '*Coningsby*,' in '*Lothair*,' and, though less, certainly, perhaps in his last work, '*Endymion*,' we can discern most easily the sympathies uppermost in himself. Honest ambition he always defends, and the higher the goal the more surely is the aspirant favoured ; while for the inferior spirits who seek to ascend only to justify a paltry desire for personal advancement, no denunciation is too strong or too severe. Political opponents in the heat of controversy cannot be expected to weigh the difference between apparent and actual avarice. From this misfortune no one, possibly, ever suffered more than the late Earl ; but when the heat of party passion had subsided, and a calm survey of the well-spent life was in the power of all, it is satisfactory to remember the generous enthusiasm with which all parties alike united in recognition of the dead man's real worth.

The psychologist's study of Lord Beaconsfield's character is necessarily confined to a simple estimate of the powers he possessed, and the way in which their evolution was influenced by the circumstances surrounding his existence. The speciality of these lies in the fact that they were to a great extent moulded by himself, and were in many cases turned to sacrifice in behalf of aims in the fulfilment of which he by no means was the first one interested, and in securing which nothing was left to chance which he conceived it in his capacity to accomplish. The men whose autobiographies make up the history of an age are all more or less spirits akin to this ; and it is no uncertain test of the value of any individual person's achievements that is afforded by the immediate appreciation in which they are held. In this particular respect Lord Beaconsfield is not likely to suffer by comparison with any who were his contemporaries, and in the one point of absolute intellectuality he can be compared with no one, since he was himself incomparable. Not that it is easy or perhaps possible to gauge the depths of his mentalism, so to speak, but we can form a fair estimate by admiration, of the diversified genius that was at once philosopher, romancist, psychologist, and politician. Lord Beaconsfield undoubtedly

was a psychologist of a high order. Each one of his works exhibits him in this light; and every character he has drawn is a careful study of a type more or less familiar to every reader. Nor are the lessons taught by him in any way less than those a rigid moralist would deem advisable in the interests of common weal. Although he is careful to avoid exaggerations such as many lesser novelists have been guilty of, and which they have been led into under the impression that so only could they hope to point the sins against which their protest is raised, yet the influence of Disraeli's novels in forming the character of the young who make a study of them, is now and will always be a potent factor in developing the minds of English youth. Very possibly they, alone, might not have so powerful a force, but they must ever possess the distinguishing feature that they are really an exposition in more or less precise terms of the conditions and motives under which the life of their author assumed its special shape. Apart from their literary excellence, they have a living interest, deathless as the monuments raised by the genius of him they continually overshadow, and, like himself, the outcome of an age that made him while itself was made by him.

In his personal relations Lord Beaconsfield was especially happy. Homage he received spontaneously; there was no occasion to exact it; and the kindling story of his defiance of defeat, his steady perseverance in pursuit of the end set before himself, and his ultimate triumphant vindication of every lofty aspiration with which he commenced his career, failed not to attract to him the devoted friendship of those whose friendship was an act of grace. His wit was of a kind to serve him well; keen, and cruel even, when occasion called for its employment, it was never directed against the helpless, or invoked in vain on behalf of deserving objects. It never failed to hurt; it never hurt unfairly, or in an unjust cause. They can recall it who suffered by it; but even the most severely stung would probably now be the first to admit the justice of the rebuke conveyed by the punishment.

More exhaustive memoirs must be consulted for the detailed history of Lord Beaconsfield's life; we have sought here only to indicate a few of the points connected with his psychological development.

ART. XI.—ON ALBUMINURIA DURING PARALYTIC INSANITY.

DR. VON RABENAU, of Vienenburg, Germany, recently published some observations he has made on this subject, and, contrary to the opinion of others who have investigated the question, arrives at the conclusion that albuminuria is far more frequent amongst paralytic patients than amongst other lunatics. He examined 40 different cases of paralysis, and found albumen in the urine of 26 of them. On the other hand, he examined the urine of 85 other lunatics, and found albumen only 31 times. At the same time he points out that the paralytic patients were examined without any choice or selection, while with the other patients the investigation was never made unless albumen was suspected in the urine from other reasons. The observations were continued for two years, and Dr. von Rabenau examined some 15 specimens of urine every day. He found, as a further detail, that albuminuria was most frequent amongst those paralytic patients who could no longer pass urine voluntarily; from these he obtained the daily specimens by means of the catheter. It was suggested to him that catarrh of the bladder might often cause the presence of albumen in the urine; and he therefore remarks that he never examined alkaline urine, or such as was of very high specific gravity. In the urine of patients suffering from epilepsy Dr. von Rabenau never found albumen, but he owns that the number of his cases may not have been sufficient for him to form a correct judgment. The conclusion finally drawn from his 26 cases of albuminuria, among 40 paralytic patients, is that this disease must necessarily result from cerebral causes, and must in many cases be entirely independent of any other illness from which the patient may suffer. This is the point on which Dr. Richter (and also Dr. S. Rabow, of Lausanne, according to a publication on the urine of the insane, from his pen) differs from Dr. von Rabenau. We cannot do better than give a short summary of the 26 cases in question, to enable our readers to judge for themselves. The first twelve of these are hardly conclusive with regard to the question at issue, as the albumen in the urine may have been caused by other illnesses; the remaining ones, however, go far to prove Dr. von Rabenau's views. (Wherever the temperatures are not given, they remained between 36.0 and 38.0 C.)

Case 1.—The urine of the patient contained a small quantity of albumen when he first entered the asylum, but this disappeared rapidly. He had several paralytic strokes, the temperature decreasing to 33.0. Later on the patient had pneumonia. No further traces of albumen appeared. Years ago the patient had suffered from nephritis.

Cases 2 and 3 showed small quantities of albumen; the patients suffered from inflammation of the bladder.

Case 4.—Albumen appeared in the urine during an attack of pneumonia.

Case 5.—September 13, 1874. Epileptic attacks for 12 hours; no albumen. September 16. Traces of albumen; temperature 40.1; slight cramps from time to time. September 2. Traces of albumen; no fever. September 26. No albumen.

Case 6.—Never any albumen until September 22, 1874. On this date traces of albumen. The patient has had a feeling of intense numbness for the last three days; temperature 40.1; lungs free. September 23. No fever; no albumen. October 5. Patient feels numbed; traces of albumen; temperature 38. October 16. Normal state.

Case 7.—Never any albumen until October 2, 1873. Showed irregular symptoms of fever, and felt very poorly the last few days; temperature 39.9 until October 28; from that day until November 8 no fever. From October 9 until November 8 a constant small quantity of albumen in the urine. Recovered so much after November 8 that he could leave the asylum after a short time. This patient doubtless suffered from some disease of the lungs (lobular pneumonia?), but the albumen remained for a long time afterwards, and only began to disappear when the cerebral complaint got better.

Cases 8 to 12.—Albumen appeared only during the last days or weeks of their lives. All these patients suffered from some severe bodily illness.

Cases 13 and 14.—During their last days the temperature sank to very low readings. The urine contained a large quantity of albumen. No somatic disease could be discovered either during life or after death.

Case 15.—When the patient entered the asylum he was in a state of deep melancholia, and for the first few months he got gradually worse, both in mind and body. Then he began to recover, and remained very much better up to the end of 1874. While the melancholia lasted much albumen was present in the urine, and the quantity decreased as the patient got better. Later on only traces were apparent on two different occasions. At the end of 1874 he had a relapse, the melancholia returned,

but no albumen appeared. The observations were unfortunately interrupted.

Cases 16 to 18.—During the last weeks of 1874 these patients declined much in health, without any apparent reason. Neither fever nor other bodily diseases could be detected. The urine, which had up to that time been always clear, now showed traces of albumen. The patients were still alive at the end of 1874.

Case 19.—Showed no albumen up to February 2, 1873. The urine was last examined on January 29; attack of apoplexy on February 2; no albumen on February 4; traces of albumen on February 6. After this no albumen until January 3, 1874; another attack of apoplexy; much albumen; no fever. January 4. No albumen until March 23, 1874. March 23. Paralytic stroke, and death immediately afterwards; much albumen; no fever.

Case 20.—Never any albumen up to October 6, 1873. Has declined much in health lately. Traces of albumen on October 6. October 7. Attack of apoplexy; temperature normal. October 8. Traces of albumen in urine. October 10. Large quantity of albumen; temperature 34.8; death.

Case 21.—No albumen up to May 5, 1873. Three days ago an attack of apoplexy. May 5. Traces of albumen in the urine.

Case 22.—No albumen up to November 1, 1873. On this day twitchings in the left arm, and strong feeling of numbness; traces of albumen; no fever. November 3. Sensation better; no twitchings. No albumen up to April 29, 1874. From that date great decline in health, accompanied by a constant presence of more or less albumen in the urine. Death soon afterwards.

Case 23.—No albumen up to December 6, 1873. On that day feeling of numbness, could not stand, took no food, and passed his excrements involuntarily; temperature 39.2; lungs healthy; much albumen in urine. December 7. Temperature 37.5; much albumen; still very numbed. December 8. Feels better; no albumen up to April 25, 1874. April 25, 1874. Similar attack as before, but without fever; but little albumen in urine. April 27. Same condition. April 29. Traces of albumen; very excited; 7.0 grammes of chloral given to him per day. May 1-12. Feels better; no albumen; from this time often albumen in urine, without any apparent connection with the cerebral disease.

Case 24.—During April and May 1874, quantities of albumen without any apparent reason; after that no albumen up to June 23. Paralytic stroke; three hours after its beginning, traces of albumen. June 24. No albumen.

Case 25.—Never any albumen up to May 2, 1874. After that date up to May 8 traces of albumen. May 9. Paralytic stroke; quantity of albumen; no fever. May 10. Large quantity of albumen; no fever; lungs healthy. May 12. No albumen; excited and noisy. May 22. Traces of albumen without apparent cause.

Case 26.—No albumen up to December 27, 1873. On that date the patient feels very numbed; temperature 38.4; he hardly takes any heed of his surroundings; phlegmon in the left arm; much albumen in urine. December 28. Temperature 37.3; formation of pus; incision; much albumen. December 29. The wound looks well; no fever and but little albumen. Up to January 15 the patient felt better; no albumen; then traces for two days. Death a little time afterwards. The post mortem examination showed that both kidneys had changed to large conglomerations of cysts.

In Cases 13 to 25, a direct connection of the albuminuria with the cerebral disease can hardly be denied. In Case 23 the temperature of 39.2 is no doubt important. Case 26 is a singular one. Dr. von Rabenau owns that it should have been added to the first twelve, where the albuminuria was complicated with severe bodily diseases. But he points out that it is also admissible to look upon the phlegmon as a trophical disturbance, particularly as the mental state of the patient at the same time got worse so considerably.

ART. XII.—LUNACY IN SCOTLAND.

THE Commissioners in Lunacy for Scotland report that there were under treatment on January 1, 1881, a total number of 10,012 patients, 4,692 being men, and 5,320 women. These were distributed thus:—In royal and district asylums, 5,920; in private asylums, 157; in parochial asylums, 1,342; in lunatic wards of poorhouses, 714; and in private dwellings 1,629. In the lunatic department of the general prison, Perth, there were 55 inmates; and in training schools, 195 insane persons. Out of these, excluding the 55 state lunatics in the Perth prison, 8,312 were pauper patients, 1,645 only being private ones; and it may be noticed that the number of patients registered as being in private asylums is only 157, whereas no less than 1,629 are put down as located in private dwellings. An increase among this class of patients, too, is recorded to the number of 106, 101 being paupers, and 5 only private or non-pauper patients. In explanation of the small proportion, 157 of patients in private asylums, it may be explained that no pauper patient is provided for in these institutions, and, in addition, the Scotch system encourages a “boarding-out” plan, whereby such patients as would in this country come into private asylums are cared for in private dwelling-houses, either by friends or by persons pecuniarily interested in their welfare. These patients are consequently of two classes, and of the total of 1,629, 113 rank as private, and 1,516 as paupers. Of the whole number placed in private dwellings, 29 were in houses possessed of special licences. The Commissioners explain that the circumstances under which a non-pauper insane person comes under their supervision are:

(1) If he is boarded in a private house for profit, and suffers from mental disorder of confirmed character.

(2) If, whether kept for profit or not, he has been insane for more than a year, and is subject to compulsory confinement to the house, to restraint or coercion of any kind, or to harsh and cruel treatment.

(3) If he possesses property which has been placed under curatary by the Court of Session.

A large number of private patients living in family, who are neither kept for profit nor restrained nor cruelly used, are, they continue, thus beyond their jurisdiction. Even a patient who is kept for profit does not require to be reported, if it is certified by a registered medical practitioner that he is afflicted with a malady which is not confirmed, and that it is

expedient to place him for a temporary residence, not exceeding six months, in the house in which he is so kept.

Although they do not regard it as desirable that any class of persons should be brought under official supervision unless such supervision appears to be necessary to guard against abuse, they regard the systematic visitation of patients in private dwellings as a duty of great importance in all cases where the statute requires the supervision of the Board to be exercised.

Concerning an increase of 101 pauper patients in private dwellings for 1880, and which contrasts with the little variation in numbers for the preceding five years, the explanation is offered that transfers *from* asylums *to* private dwellings have far exceeded those *to* asylums *from* private dwellings, and also that as many as 31 new cases in excess were reported by the inspectors of the poor. The Deputy Commissioners present most favourable reports of the conditions of patients in private dwellings; thus Deputy Commissioner Fraser says:

"The general condition of the patients in private dwellings appears to me to be steadily improving. The recommendations and requirements of the Board, especially in regard to lay and medical supervision, have, on the whole, been most faithfully carried out, and consequently the care and treatment of the patients are better. It is at present exceptional to find neglect of supervision, or the omission of its careful record in the book kept for the purpose. There is also on the part of the bulk of parochial boards a willingness to give effect to the suggestions of the officers of the Board; and when new cases occur, the standard of house accommodation and of comfort which is provided is generally such as at once to satisfy the Board."

And Deputy Commissioner Lawson reports that:

"The insane who are resident in private dwellings and specially licensed houses throughout the district assigned to me were found during my last visitation to be so well cared for that only in a few instances was it necessary to make more than merely casual suggestions for the improvement of their conditions."

The overcrowding of asylums renders the necessity for a boarding-out arrangement increasingly apparent, and this may be taken to account for the number of such patients so situated who with us would be provided for in one or other of the private asylums. It is satisfactory to know that the results obtained by this plan are favourable, but however much this may appear to be the case, there cannot be expected that so much benefit will be derived by patients thus precariously situated, as would follow were they regularly cared for by experienced persons in duly appointed institutions for the insane. Indeed, the Commissioners themselves acknowledge

this, in a measure ; and it is significant that in spite of all the favourable reports received by them they are nevertheless compelled to observe that “ there are still, and perhaps there must always be, cases in which we are compelled to give our sanction to conditions that are not quite satisfactory. In the case of patients under the care of their parents or other natural guardians, it is sometimes impossible to obtain what we regard as desirable to make the patient’s condition satisfactory, without removing him to other guardianship, or making some other radical change in the arrangements to which the natural guardians will not consent.”

On the subject of private asylums the Commissioners are united in commendation of the arrangements existing in them for the comfort of patients ; and in no single instance is any complaint uttered against either the administration or the buildings. Special attention is again drawn to the success attending the employment of lady attendants at Staughton Hall Asylum, near Edinburgh. “ They are in constant association with the lady patients both in and out of doors, and they are assisted by ordinary attendants, acting more or less as ladies’ maids, and by housemaids and tablemaids. The way in which this introduces ordinary domestic arrangements and habits into the life of the asylum is believed to be very beneficial to the patients.” This plan has also been followed with success at the Whitehouse Asylum, where, in addition to the ordinary attendants, four lady companions, who do no menial work, have charge of the female patients.

Parochial asylums and lunatic wards of workhouses generally are favourably noticed by the Commissioners, who, beyond suggesting improvements in the arrangements, &c., find no fault with them.

During the year five patients were admitted to the establishment for State or criminal lunatics at Perth, and two patients, one male and one female, were discharged recovered within the same period. Four men and one woman were also sent away not recovered, and four male prisoners died. On December 31, 1880, there remained a total of 55 inmates of the institution. The following important communications respecting this asylum have been made to the Commissioners in Lunacy by the Medical Commissioners, and should at any rate excite an immediate desire to remove the abuse complained of :

“ The chief defect in the management of the establishment continues to be due to the insufficiency of the extent of ground devoted to the exercise and employment of men. The mental condition of many of them might be greatly improved if a suitable opportunity of employment were available ; and it is impossible to provide this without a considerable addition to

the extent of land. A very large proportion of the men are in a condition of constant excitement or irritability, which is injurious both to themselves and the other inmates, and which would be greatly allayed by out-door occupation. Many of them labour under forms of insanity which are similar to those met with in ordinary asylums, and which are found comparatively free from dangerous violence and not requiring special treatment when in such institutions, though in these wards it is found necessary to keep them under frequent mechanical restraint.

“ It is perhaps impossible, in the present circumstances of the establishment, to avoid resorting to this extensive use of mechanical restraint ; but it cannot be overlooked that in most cases it intensifies the state of irritability from which the impulses to violence arise. The evil has been frequently dwelt on in previous reports ; but it is proper that attention should be again and again drawn to it, in the hope that steps may be taken to apply a remedy. Ample elbow-room and greater facilities for industrial occupation would undoubtedly be accompanied by a great improvement in the condition of most of the male inmates.”

In the report dated 10th July, 1880, it is stated that “ six men and two women were found mechanically restrained,” and it is added that “ these numbers would be immediately reduced if active out-door work were more abundant, and if the airing courts were enlarged.”

Considerable space is devoted in this report to the question of exercise and recreation of patients in asylums, and it is a pleasant reflection that a much greater amount of liberty is now enjoyed by the unhappy victims of mental disease than used to be the case. By the extension of the principle of freedom as far as possible in Scotland three important improvements have been introduced into the mode of treating patients, viz.: (1) the abolition of walled airing-courts ; (2) the disuse of locked doors ; and (3) the extension of the practice of giving liberty on parole. The Commissioners comment on each of these subjects separately. Under the second heading they write ; “ It is year by year becoming more clearly recognised that many advantages result from the working of the open-door system, and it has now been adopted to a greater or less extent in most of the Scotch asylums. In the Fife and Kinross Asylum, which contains about 330 inmates, only two wards, one for 20 female patients and one for 30 male patients, are kept locked ; and in the Barony Asylum at Lenzie, which accommodates upwards of 500 patients, there is free communication between all the wards, as well as free egress from each of them to the general grounds of the estab-

lishment." The advantages claimed for the system are many, and chief among them may be mentioned the removal of any cause for a patient to watch a chance of finding egress through an incautiously opened door, and the consequent greater quietude of his condition at all times. One effect of the removal of physical restrictions is described as stimulation of efforts to develop the industrial occupation of patients. The benefits of healthy and moderate employment cannot be over-estimated in many instances, and although the system is not applicable in every class of cases, yet sufficient good is achieved by it to render its general introduction of desirable attainment. We cannot give space to a further account of the attempts being made in this direction in Scotland; but a reference to the pages of the Commissioners' report in which they are described will be well repaid.

During 1880 167 private patients, or 27 below the average for the preceding five years, were discharged recovered out of the total number under treatment; and of paupers 941, or 80 above the average for the five years preceding. The following table detailing the percentage of recoveries under each class is instructive :

Classes of Establishments	Recoveries per Cent. of Admissions			
	1875 to 1879		1880	
	M.	F.	M.	F.
In royal and district asylums . . .	36	44	41	41
In private asylums	40	44	36	38
In parochial asylums	33	36	44	37
In lunatic wards of poorhouses . .	11	10	4	8

It will be observed that in this statement private and pauper patients are not distinguished from one another. It would be necessary that this should be done, and also that the effect of transfers should be eliminated from the calculations before the results obtained in the different classes of establishments could be fully appreciated.

Excluding transfers, 145 private and 303 pauper patients were discharged unrecovered; and the number removed on probation was 87. Of these 28 have been finally discharged, 4 died, 7 remain in care of friends, 12 have been returned to asylums, and 38 remain on probation.

This report is full of interesting information, and is in all pertaining to the care and treatment of lunatics replete with valuable suggestions. We regret that we are unable to devote further space to an examination of its contents.

IN MEMORIAM.

Dr. ISAAC RAY, M.D., born January 16th, 1807 ;
Died March 31st, 1881.

BETWEEN Dr. Isaac Ray and myself there has subsisted a most intimate and cordial friendship for nearly fifty years. Yet we never met. The cherished tie was mutual respect, identity of pursuits, and appreciation of the qualities and objects of our minds ; and these strong and earnest bonds have stood the test and tear and wear of half a century of wide separation by time, continents, and opinions, and now leave me an aged mourner over the last of his early compeers and with the same profound respect and sentiment of attachment originally created, and which was shared by Lord Cockburn, then Attorney-General of England, for the philanthropist who had written "the most scientific treatise that the age had produced on the subject of insanity in relation to jurisprudence." On my side the introduction was effected by my perusal and admiration of the work thus characterised, which appeared at Eastport, U.S., in 1838, which coincided so closely with the philosophical views which I then entertained, advocated so lucidly and with such humanity the condition, the capacities, and the practicable amelioration of the insane, and was couched in a style so pure, dignified, and thoroughly Anglican, that I then ranked and still rank the book as among the classical works in our department. Our intercourse was sustained by correspondence, but chiefly by the interchange of our respective writings, and the views and the hopes and experience which these contained. I journeyed with him in all his onward steps towards that elevation to which he ultimately attained. I studied and conserved his principles and propositions, and it is possible that he offered me the same homage in becoming acquainted with what I did and what I aspired to do. I embraced or anticipated his views on the "Legal Consequences of Mental Deficiency" both as they were propounded judicially and philanthropically. I advanced still further, and at a period when such opinions were regarded as heretical, I admitted with him the existence of "Moral Mania" as cognate with other forms of insanity, and as exonerating patients so affected from the accusation or punishment of guilt. His perspicuous illustrations of the "Duration and Curability of Madness," "Lucid Intervals," "Simulated Insanity," all presented freshness and fulness to the mind of the Anglican psychologist. His observations on the effect of insanity on evidence are, especially in connection with several of his subsequent

Papers, still worthy of grave attention. Amongst the more recent writings alluded to are many of his essays composed and published after he had retired from the public charge of the insane, established himself in Philadelphia, and devoted himself either as a student or an expert to testify to sound views as to the responsibility of those suspected of alienation or actually brought to trial. Amongst these may be enumerated "The Law of Insanity in Criminal Cases"; "The Trial of Rogers"; "The Insanity of Seduced or Deserted Women"; "The Parish Will Case," &c. &c. &c., and a large number of others comprehending even a wider subject, and containing vast stores of knowledge and experience which had been garnered in the most fertile fields, and by the most careful and conscientious of cultivators. All these memoirs were written in the purest, most lucid, and unprovincial English that has ever been attained either by a scientific or literary foreigner. My venerated friend lighted his path by the lamp of religion, high morality, and domestic affection until the very close of life.

Dr. Isaac Ray was born at Beverly, Mass., January 13, 1807; he graduated at Harvard Medical School in 1827; in 1841 he was appointed superintendent of the State Hospital for the Insane at Augusta, Me., where he remained till 1846, when he accepted an appointment to the superintendency of the Butler Hospital at Providence, R.I. In this institution, which may be said to have been created under his auspices, Dr. Ray remained a laborious administrator and faithful student of this great specialty, for the benefit of the public—*non sibi sed toti*—until the year 1867, when, impelled by considerations of health, he resigned, and removed to Philadelphia. Since the period of his retirement Dr. Ray has never ceased, even under the infirmities of failing health, to enlighten his profession and the community as a scientific authority, a learned expert, and a philanthropist.

The last words written to me by my dear and valued correspondent are dated January 11, 1881, and conclude as follows:

"If I have made mistakes, it ought to be considered that I was a sort of pioneer in a department of medical science which had been little trod before, and really deserve commendation for having made so few. I certainly drew attention to the subject as it never had been done before, and honestly believe that between 1838 and 1881 some advance has been made, sure and stable, in the right direction.

"You heard correctly that my health is failing. An old bronchial complaint, reinforced by an old chronic rheumatism, has sent me a long way towards the end. I am so short of

wind, that the slightest muscular movement makes me pant, and keeps me confined to the house, oscillating between the sofa and easy chair. My nervous apparatus is also so disturbed that all capacity for thinking has gone, or with not more left than is sufficient for reading a newspaper or a novel. Generally my hand is so shaky that I am unable to write beyond a few minutes, and I am now surprised that I have accomplished so much as this. Of course with such ailments, and with 74 years on my head, I cannot last much longer. I am rejoiced that your latter days' journey is attended with so many alleviations, and trust they will continue to the end.

“ My friend Dr. Kirkbride, who a year ago was near unto death, seems to be as strong as ever, and has even written a book. But my hand begins to tremble, and my brain to swim, and so I hope you will excuse my stopping here with so much blank space left. Again expressing my thanks for your kind inquiries, I remain,” &c. &c.

W. A. F. BROWNE.

ARCHIBALD BILLING, one of the most distinguished and accomplished physicians of this century, loved and respected by all who knew him, has at length, full of years and honours, passed away from us at the patriarchal age of 90, at his house in Park Lane.

Dr. Billing was a native of Ireland. He studied at Trinity College, Dublin, and graduated at Oxford. He was elected a Fellow of the Royal College of Physicians of London in 1819; and at the time of his death he was the oldest Fellow on the roll. He was the founder of clinical lectures, and the author of *First Principles of Medicine*, a profound and original work of great value when it was written, the absorbing study of the details of morbid anatomy having at that time withdrawn the attention of pathologists from the recognition of general truths. Those who were acquainted with him in private life can bear testimony to his kindness of heart and gentleness of demeanour. As a consultant he was most honourable, and never aimed at raising his own reputation at the expense of a brother practitioner.

Dr. Billing was tall and thin, with a very pale face; nevertheless, he had a remarkably vigorous constitution, and until towards the close of his career made all his professional visits on horseback, and might often be seen, after a hard day's work, cantering along Rotten Row, accompanied by his daughters.

REVIEWS AND BIBLIOGRAPHICAL NOTICES.

A *Treatise on Diseases of the Nervous System. Illustrated with Lithographs, Photographs, and two hundred and eighty Woodcuts, 2 vols.* By JAMES ROSS, M.D., M.R.C.P. Lond.; Assistant Physician, Manchester Royal Infirmary; Consulting Physician, Manchester Southern Hospital. Churchill, London, 1881.

THE progress of investigation, clinical and experimental, tends to make works on diseases of the nervous system become speedily out of date. Even standard treatises are obsolete in a few years. It is not that the older books were inaccurate in their descriptions of disease, or were wrong in their treatment of it. On the contrary, it is easy to find, in old medical literature, portraiture of disease as vivid, as striking, and as accurate as any that can be found in the pages of our best modern writers. The old authors fall into desuetude, not because their statements are inaccurate, but because, since their day, many additional facts have been observed, interpreted, and embodied with our previous stock of knowledge. A ripening experience has not merely added new facts, but has discerned the relations that bind them together. And so it happens that nervous diseases are now perhaps as well understood as any other disease whatsoever. The changes in structure that underlie altered function have now to a very large extent been made out; and it is now possible in most cases to say, with a close approach to certainty, what is the precise seat and nature of the disease.

The work before us is a noteworthy one, and is sure to become the standard treatise on diseases of the nervous system. It possesses all the marks of the highest merit in standard works. It is comprehensive; it is accurate; it is thoughtful. The style is plain, simple, and clear—such as befits both a scientific subject and an earnest worker. The illustrations are copious; many of them are original; most of them will be new to English readers, while they are all characterised by the ease with which they are understood and by the appropriateness with which they throw light on matters that otherwise would be difficult of comprehension.

Regarding the plan of the work a few words may be said.

The first portion, occupying about two hundred and eighty pages, treats of the general pathology of the nervous system, and includes an outline of the structure and functions of the nervous system generally. Chapters on etiology, symptomatology, the elementary affections of the Sensory, of the Motor, and of the Nutritive apparatus follow; and the general diagnosis, prognosis, and treatment of nervous diseases are discussed with considerable fulness. The remainder of the work is occupied with the Special Pathology of the Nervous System.

The divisions under which the Special Pathology is dealt with are five: diseases of the peripheral nerves, of the sympathetic system, of the spinal cord and medulla oblongata, of the encephalon, and lastly of the encephalo-spinal system. A minute and admirable account of the anatomy and physiology of each portion of the nervous system precedes the descriptions of the diseases to which it is subject. When thus examined in the light of physiology, the diseases become much more intelligible; and we do not know any systematic work in which anatomy and physiology have been kept so steadily in view throughout, and in which the application of physiology to medicine has been so fruitful of good results.

This work embodies the outcome of continental, as well as of home, neuropathic research. Not merely is it a credit to the provincial school where so much work of merit has been accomplished; it is an ornament to English medical literature.

Diseases of the Nervous System, especially in Women. By S. WEIR MITCHELL, M.D. London, Churchill, 1881.

THIS book consists of a pleasant series of lectures by a distinguished American physician. The subjects dealt with are mostly unusual or puzzling varieties of nervous diseases in women, and the mode of treating them.

Formerly no cases were more unsatisfactory as regards treatment than some chronic hysterical ailments. The patients were confirmed invalids, the despair of physician after physician, who in turn had charge of them. In most cases the patients are weak, pallid, and flabby. The successful treatment of these cases is accomplished by seclusion, rest, massage, electricity, and full feeding. In a comparatively small number of cases the patients are stout, but not well coloured; though fat they do not look healthy. These cases require a little modification in the foregoing treatment. They must first for a while be underfed, and then built up afresh by over feeding. The

absolute rest enables the underfeeding to be carried out with safety, while the massage and electricity take the place of exercise. By these means Dr. Mitchell, and many other physicians, have had unprecedented success in the treatment of these trying and distressing maladies.

The book is a good and useful one and will repay perusal.

Rheumatism: Its Nature, its Pathology, and its Successful Treatment. By T. J. MACLAGAN, M.D. London: Pickering & Co. 1881.

THIS work, by Dr. Maclagan, who was the first to introduce salicylic acid as a remedy for acute rheumatism, is full of suggestive remarks and valuable practical hints. His theory is that acute rheumatism is the effect of miasma, and he quotes Haygarth who "thought that there were several analogies between an ague and a rheumatic fever." For the facts on which he bases his theory we must refer our readers to Dr. Maclagan's work. They are too numerous for insertion here, as our space is too limited for their enumeration. We are at issue with the author as regards the comparative value of salicylic acid and quinine—he gives his preference to the former drug; we think the latter is by far the most efficacious remedy, given with bicarbonate of potash, and held in solution by means of a solution of gum arabic.

American Journal of Insanity. July, 1881. Edited by Dr. J. P. GRAY, of Utica, N.Y. State Lunatic Asylum, New York.

THIS journal never disappoints us. The following remarks by Dr. Jacob Weiss of Vienna on Melancholia deserve especial notice:

"It has become the custom to regard, as a stage of melancholia, conditions of stupor beginning with general depression, under the name of *melancholia cum stupore*, in contradistinction to *melancholia activa* or *agitata*. We have elsewhere insisted that stupor is not to be confounded with the clinical phenomena of melancholia, that the condition of stupor stands in no closer connection with melancholia than with any other form of psychical disturbance; and if the systematic grouping of different symptoms is to have any significance at all, we must not lose sight of definite characters as belonging to a definite

complexus of symptoms. This is not the case, however, if we regard as characteristic the anxious and gloomy frame of mind, with all its concomitant expressions of self-reproach and tendency to suicide, while at the same time we consider the state of total psychical and motor arrest, without spontaneity whatsoever on the part of the patient, likewise a melancholic condition. Depression and fretful self-disparagement, the cardinal symptoms of melancholia, have just as little to do with stupor as with typical mania. It is an error to suppose that there is behind stupor a condition of depression and anxiety. Convalescents from stupor remove all doubt in regard to this point, since they aver that they thought of nothing and were incapable of thinking, intimating that all cerebral activity is impossible.

"This is not the case with melancholics. Psychical processes take place, if in dreary monotony of distressing ideas. The melancholic is never so apathetic and void of all spontaneity, never so listless and indifferent as the patient in a state of stupor. Apart from the intercurrent stages of extreme excitement which frequently supervene under the influence of great anxiety, the melancholic always evinces a certain degree of activity, a necessity to give vent to his woes and self-depreciation, which is entirely excluded by stupor. We may refer, in this connection, to the frequent cases of senile melancholia, which are diagnostically obscured by stupor only in extremely rare instances, indeed almost never."

The whole of the article, as well as all the other papers, are well worthy of perusal.

The Medical Record, a weekly journal of Medicine and Surgery. New York. July 30, 1881.

WE regret to find the following statement, made by the editor, in a notice of Mr. Cyples's work, "An Inquiry into the Process of Human Experience":—"It is undoubtedly the tendency of scientific studies to incline the mind toward materialism." We beg to protest most decidedly against this assertion. A smattering of science no doubt "puffeth up," and makes "the fool" say "in his heart there is no God." It is far otherwise with our deepest philosophic and scientific thinkers, *e.g.* Bacon, Newton, Bradley, Pascal, Barrow, Whewell, Sir Humphry Davy, Faraday, Brewster, &c. &c. These men "looked from Nature up to Nature's God." We would remind the writer of Lord Bacon's celebrated aphorism:—"A little philosophy inclineth men's minds to Atheism, but depth in philosophy bringeth men's minds to religion."

The New York Medical Journal and Obstetrical Review.
Edited by Dr. FRANK P. FOSTER. August, 1881. New York: D. Appleton & Co.

In this number Dr. H. H. Kane discusses the important question of Habits. He is the author of *Drugs that enslave. The Opium, Morphine, and Chloral Habits*. He contends that there is such a thing as chloral habit, although it has been denied. He instances two cases of chloral-taking which had given rise to habits, after there was no further occasion for the use of the drug. The most interesting part of his paper is that in which he discusses the meaning of the word habit. He says:

“ It is a term that is, at best, indefinite, and one that has been used by different writers very loosely. There seems to be no single word in any language that expresses precisely the hold upon the system acquired by certain drugs, when taken for a longer or shorter period. Levenstein finds the term ‘morbid craving for morphia’ best suited to his understanding of the peculiarities of these cases. Like the word ‘habit,’ however, it does not express the matter either fully or clearly.

“ Of those people who are addicted to the continual use of morphia and chloral there are two classes, the division resting upon the manner in which the drug was first used. In the one class there is a morbid appetite that may be fed upon excitement, alcohol, absinthe, quinine, hashish, bromide of potassium, chloral, or opium. It may have for its subject anything, and will be classed according to that upon which the appetite becomes most fully fixed. Given a person with such morbid propensities, and let him, either of his own free will or through the agency of another person, begin to use any drug of this class, and he will fix upon that drug in nine cases out of ten and become an habitual user of it. Once habituated to its use, the entire nervous system rebels at its withdrawal, and the victim to his own morbid appetite continues to use the stimulant or sedative, as the case may be, not because the satisfaction first experienced continues, but because any attempt to do without the agent produces such distressing symptoms that the weak-willed patient is compelled to resort to that which he at one and the same time loves and hates. Opium and morphine, but more especially the latter when used subcutaneously, seem to stand first in the list of those substances that have the power to enslave persons of this class.

“ In the other class there is no morbid craving for any form of stimulant or narcotic, but the long-continued use of the drug; usually for the relief of pain, produces a systemic state analogous

to that existing in the first class before the drug was taken. In the one the drug ministers to a morbid craving already existing; in the other it establishes a necessity for continuing its use. The objection to the term 'craving' in this connection is that it implies a longing for something that is expected to give pleasure, whereas to the majority of habitués pleasure becomes a meaningless word after a short time, and 'inability to do without' takes its place. It is really an hereditary or acquired involuntary tendency, that through accident or design becomes fixed upon a certain stimulant or narcotic that develops, increases, and perpetuates the tendency.

"As an example of the second class of cases, we may take those persons who, having absolutely no desire or longing for tobacco, commence its use simply because it is the custom, despite the fact that it sickens them at first. Having continued its use for some time, they find that they have fastened upon themselves a habit that requires no little will power to shake off. Tobacco is the type of those substances that possess less *fastening* power than morphine. To this class belong alcohol, chloral, hemp, the bromides, quinine, &c. In the case of each, we find persons who can and do use it for a certain length of time without the establishment of that systemic state that calls for a repetition of the dose as soon as the effect of the preceding dose has worn off. The knowledge of this fact, however, does not prove to us that certain persons, owing to some peculiarity wholly unknown to us, will not under the same circumstances become abject slaves to the necessity for continued use."

There are also some valuable *Psychological Notes* in the same number which will interest all engaged in the treatment of insanity.

*Thirty-Eighth Annual Report of the Utica State
Lunatic Asylum.*

THE report of the managers of the State Lunatic Asylum of Utica, for the year ending September 30, 1880, is an interesting one in many respects. During the twelve months, 1,088 patients were under treatment, 468 having entered within the year, 620 being the number in the institution at its commencement. Of these, 565 were men, and 523 women; while the discharges amounted to 271 males, and 203 females. These latter are apportioned as follows: recovered, 155, viz. men, 74, women, 81; improved, 66: men, 40, women, 26; unimproved, 197: men, 117, women, 80; not insane, 14: men, 13, women 1; died, 42:

men, 27, women, 15. Deaths took place in the case of seven patients within eleven days after admission, acute or chronic disease being at the date of their entry well determined. To these must be added two cases of suicide, omitting which and thirteen deaths from paresis, the number of instances of what may be termed preventable mortality is reduced to five—a small percentage on the total number of inmates. These five patients died: three from meningitis, one from cerebral congestion, and one from acute pleurisy. No case of zymotic disease occurred during the year; and the general health throughout the asylum is described as excellent. Certainly the results speak well for the hygienic and sanitary arrangements, in carrying out which considerable expense is shown to have been incurred, from the balance-sheets included in the report. It may be that the advice tendered by the superintendent, and followed in part in the Utica asylum, is calculated to bring patients under the most favourable circumstances for treatment in case of illness. It certainly deserves to be noticed. He suggests the construction of a small wing in connection with the wards, for the especial care of the sick; and the experience obtained on trial of the plan on the women's side of the house has been of the most favourable kind. It is calculated that such a hospital wing, with necessary bath and service rooms, heating apparatus, &c. costs about £2,500. It offers very fair prospects of being attended with advantages.

The important subject of staff discipline affords material for some apposite observations in this report, and it appears from it that stringent regulations are enforced in the asylum to ensure the most favourable treatment of patients by those entrusted with their care. "Nothing," it is urged, "short of the highest discipline can secure that degree of oversight and care so essential to the comfort of the patient and his restoration to health"; and we may add that the pages before us amply testify to the zeal and efficiency, with the duty of superintendence, in this particular has been carried out. The truth contained in the following statements might, we fear, be better appreciated in more than one public institution in this country, to the advantage of patients, and the success of the asylum. "In their daily intercourse with patients, the attendants are required to be governed by the same laws of politeness that are recognised and obeyed in ordinary life. Indeed, they must extend to those under their care far more than the ordinary consideration and kindness of humane society." With experiences of the uncouth, careless demeanour of state asylum attendants in this country before one, there is some difficulty in understanding that this is written of officials in

public asylums for the insane in America. That it simply defines what is, after all, no more than ought to obtain, does not lessen the force of the comparison ; it can only excite an earnest wish that such enlightened rulings may quickly become commonly recognised in place of the harsh, unfeeling principles that seemingly guide the conduct of keepers in British state-supported institutions.

The question of restraint, important in itself, doubly so in its issues, is discussed at some length. The managers of the Utica Asylum " have not failed to observe in some quarters a disposition to create agitation upon questions which might be supposed to have long ago settled themselves in the light of experience, if experience is to be allowed to settle any issue that is acknowledged to rest upon a practical question of fact. There must be some subjects, however," they continue, " upon which experience proves the safest test of practicability ; and such a subject, we believe, is the care and treatment of the insane, and the conduct and management of our lunatic asylums. The managers would refer especially to the discussions that have arisen among professional men in the care of asylums in regard to the desirability of abolishing and dispensing with all forms of mechanical restraint in the treatment of the insane, and the question whether various proposed substitutes for these things are really in the line of advance, or rather form a retrograde movement in dealing with this fearful malady. This discussion, carried on almost with acrimony by some theorists, is reflected outside of the circle of professional experience, even in the ordinary newspaper press, creating prejudice, not to say alarm, in the popular mind, and is more or less concerned in the legislative inquiries into the internal management of the public institutions that have been prompted from time to time. Feeling, therefore, the importance of the subject, the managers have requested the superintendent of this asylum to include in his annual report to them a full presentation of the present *status* of professional opinion and practice on this question, whatever it be, fortified by such facts of experience as may throw light upon it and furnish its justification."

This report of the superintendent, Dr. John M. Gray, is printed in full, and constitutes an admirable and exhaustive analysis of the opinions held in respect to restraint by a large number of eminent authorities. It forms most instructive reading and reflects infinite credit on the author of the paper, who is thus enabled to put the whole question in judicial form before the eye ; and not least instructive is the final conclusion at which he arrives, and which is but a repetition, to the following effect, of that which, as he says, he uttered twenty years ago :

“ We look upon restraint and seclusion, directed and controlled by a conscientious and intelligent medical man, as among the valuable alleviating and remedial agents in the care and cure of the insane. That they are agreeable in their application or use, either to the physician or patient, no one will maintain. Indeed, few, if any, medical prescriptions are agreeable. The bitter and nauseating draughts, the abstinence in diet, the seclusion of the patient to the sick room, and the exclusion therefrom of friends, are prescriptions for the cure of disease, as are the knife and appliances of surgery, and they are adopted and prescribed as such. The physician who would not administer the best remedy because it might offend the taste, or the surgeon who would not use the knife, or other means, because he might thereby cause pain ; or the obstetrician who would lay aside, under any such consideration, the remedies required in critical cases, would be unworthy of the profession, and the confidence of the public.”

Occupation for the insane is considered at some length, and expressions are employed in accordance with the general English view that beneficial results are obtained from insistence on a due amount of labour, to be exacted from all capable of healthy employment. There is every indication indeed, that the affairs of the asylum are conducted with the strictest regard to the chief purpose for which it exists, viz., the cure, and improvement of the mentally unsound. The whole report is most satisfactory, and in many places is full of valuable suggestions.

Sixty-fourth Annual Report of the Asylum for the Relief of Persons Deprived of the use of their Reason, Philadelphia.

THE Asylum for the Relief of Persons Deprived of the Use of their Reason is the somewhat extended title of a small institution at Philadelphia, managed by members of the Society of Friends. The sixty-fourth annual report of the Superintendent, Dr. John C. Hall, briefly details the changes which have taken place among the inmates under his care during the twelve months covered by it. From it we gather that one hundred and thirty patients were treated in that time, of which number 40—17 men and 23 women—were new arrivals. Thirty-six discharges are chronicled ; of these 14 were restored, six much improved, three were improved, and 13 were stationary. This asylum might, we should imagine, justly claim to be the paradise of chronic cases, judging from the length of time many of the patients have been resident therein. One of the discharged

is said to have been an inmate of the asylum "about forty-seven years," his removal to a state hospital having been necessitated in consequence of the cost of maintenance. The superintendent cheerfully explains that "a large majority of those who are at present inmates of the house are chronic cases, in which the hope of recovery is but small," and further on he adds, "A number of these have been residents of the asylum more than thirty years, are now quite advanced in life, and will in all probability add to our mortuary list, as similar cases have in the past year." This touching trustfulness in the certain extinction of the aged chronics, who form the major part of those for whom he is called upon to care, oddly precedes the statement that "The general health of the patients has, however, been good, there having been no epidemic or endemic disease prevalent."

The following passage from the report is worthy of note, and will probably be endorsed by all who are widely familiar with the prominent part played by alcohol in the causation of insanity:—"In considering the causes of insanity among those admitted last year, we find seven patients, four men and three women, whose disease was attributable directly to intemperance. I believe its influence in the production of insanity to be rather understated than otherwise. If those cases could be numbered in our statistical tables where the indirect effects of this vice can certainly be traced, the list would be augmented."

The occupation question seems to excite the American superintendents of asylums in a great degree; and even in the little institution maintained by the Philadelphian Quakers, a difficulty arises in respect to it during the colder part of the year. The long winter evenings are with difficulty got through without the aid lent by amusements, and in America these are largely enlisted as a means of expediting the passage of time. In the summer less trouble is met with in this respect, and the Philadelphia asylum is well situated in wooded country, and provided with ample gardens and lawns.

This report includes no special details of scientific interest, but is a plain, unpretending record of the year's progress.

Annual Report of the Kingston, Ontario, Asylum for 1880.

DURING the year ending September 30, 1880, there were under treatment in the Kingston Asylum 491 persons, of whom 245 were male and 246 female patients. Of this number 32 died. The number of admissions in the twelve months was 68, 31 being women. The discharges amounted to 24, 15 men, 9

women; in addition to these two males "eloped." The discharged patients are divided into probationers and permanent. Of the former there were 14, 5 of whom were sent away as "recovered" and 1 as "improved." Three others have been returned to the asylum, and 5 were at the time the report was issued still at large on trial. The superintendent explains that, owing to sundry circumstances, the institution under his care contains but few acute cases, the great majority of the residents being incurable, thus bringing the discharges to a very meagre total. He makes the suggestion that were district physicians to urge the immediate removal of patients to the asylum while their insanity is still in the acute stage, much greater benefits to them would be the result. Among the deaths was one of a man subject to severe epileptic attacks, who succumbed during a paroxysm of unusual length. On *post-mortem* examination the skull was discovered very much thickened and indurated, and in places bony projections into the cavity were found. Disease of the membranes existed also, but the brain attained average weight and development, and "no disease could be detected with the naked eye." It is perhaps too much to expect that every asylum shall contribute pathological records concerning the condition of those of its patients who die while under treatment, but there are an infinity of reasons why they should be obtained whenever possible. In many of the better managed institutions this is now attempted as far as possible, and we may by and bye be able to look upon those asylums whence such reports do not emanate, as the exception rather than the rule. The gross results of *post-mortem* examinations are valuable so far as they go, but they do not go nearly far enough to satisfy the curiosity reasonably felt by the medical psychologist to know what are the conditions set up by the diseases of insanity. Only as knowledge of the most perfect kind in this direction is accumulated, can we hope to make a real advance in the science of treatment.

The bulk of this report deals with matters that will have interest only for the subscribers to, and governors of, the institution in question; but the paragraphs relating to winter amusements provided for the inmates are noticeable as showing the extent to which this mode of providing for their wants is practised on the other side of the Atlantic. Indeed, in all American asylums much stress is laid on the necessity of affording frequent evening entertainments to the patients, and, as a rule, the work seems to be well and faithfully carried out. So far as any direct judgment on the advantages conferred by these attempts to divert the minds of the insane for a time from their pre-occupation, can be formed, it must, of course, be

drawn from a study of the statistical returns provided in the reports furnished from time to time by professional superintendents, and comparison of them with similar statistics from other places where a like plan of providing amusements is not followed out. We do not propose to do this here any further than to say that any superiority of result is apparently on the side of those who systematically pursue the former course; and with American institutions for the treatment of insanity generally, it is found that much good is obtained from frequent introduction of such an element of change as is instanced in these entertainments.

The following extract from the Kingston, Ontario, Asylum report under notice, inserted in the inspector's account of his visit to the institution, will be of interest as showing the necessity for an arrangement which exists in all well-regulated establishments in this country:

"In previous minutes I have called attention to what appeared to me to be a rather serious defect in the asylum service, viz., the performance of ward duty by the mechanical staff of the asylum. It was quite evident that if the carpenter, tailor, gardener, and farmer performed the work required of them in a satisfactory and efficient way, they could not have time to look after patients other than those whose work they were required to direct and supervise. Such being the case, the Medical Superintendent was instructed to detach the *employés* named from the list of attendants and require of them only the performance of the work their respective designations indicated."

Annual Report for 1880 of the Inspector-General of the Insane, New South Wales.

THE official report of Dr. F. Norton Manning, Inspector-General of the Insane for New South Wales, is a document from which very much interesting and instructive information is to be obtained. It extends over forty-four closely-printed pages of foolscap, and deals with the condition and progress, during the year ending December 31, 1880, of a total of 2,099 patients, distributed through six permanent and one temporary hospitals, and one licensed house. The number of patients admitted for the first time into the hospitals for the insane during the year was 267 male and 145 female, a total of 412; and the readmissions numbered 28 males and 30 females, a total of 58. The admissions and readmissions together were 470, being in excess of those for any previous year. The

number of patients received from other institutions for the insane—transferred under section 80 of the Lunacy Act—was 66. At the Licensed House, Cook's River, 5 patients were admitted for the first time, 1 was readmitted, and 9 were received from other institutions. It thus appears that the total admissions to all the institutions was 417, the readmissions 59, and the transfers 75. The largest of these institutions, the Paramatta Free Hospital for the Insane, contained, during the twelve months, an average number of 744, 562 males and 212 females; 124 patients were admitted, and 41 discharged recovered; while 3 were absent on leave, and 53 died in the hospital. At the date of the report the number of inmates had risen to 839, and complaints are made of the insufficient accommodation afforded by the existing buildings for the large number it is found necessary to receive within them. The Medical Superintendent reports his regret "that the new buildings intended for the comfort and reception of the female patients remained almost in the same condition as they were this time last year. No steps have been taken towards completing them, and this excellent block of buildings remains useless and uninhabitable, whilst the female patients are consigned to such accommodation as is a standing reproach to an institution dedicated to the care and alleviation of the most terrible forms of human suffering." This unsatisfactory state of affairs may well arouse the expostulation of the officials, on whom, moreover, must fall some share of the blame attaching to improper arrangements, however much they may deprecate their existence. With the drawbacks thus apparent it says a good deal for the executive, that it is possible to record a percentage of 46 recoveries on admissions of free patients, while on all classes, the hospital receiving in addition a certain number of criminal lunatics, the percentage of recovered is 39·4 on first admissions. Amongst the deaths we find one at 89 years, this patient having been a resident in the Paramatta Hospital for a quarter of a century. A male, aged 72, died after being 32 years an inmate, and the youngest who succumbed was 26 years old, resident nine months. One patient, over 80, was discharged recovered after 21 days, and the average duration of residence was: of men, 8 years 9 months; women, 10 years 8 months. Two sudden deaths from apoplexy occurred, and the whole 49 who died are accounted for thus:—cerebral disease, 31; thoracic disease, 8, 6 being classed as pulmonary consumption; general debility, and old age, 9; and dysentery and diarrhoea, 1. In spite of the insufficient state of the buildings referred to, the general health of the patients is described as good, and a freedom from epidemics prevailed. In

a table showing the causes of insanity of those admitted during 1880 we find the three highest numbers (excluding the "unknown," 16) assigned to intemperance, 11; hereditary influence, 7; and ascertained congenital defects, 8. The question of amusements has occupied considerable attention, and every effort appears to have been made to secure as much rational recreation as possible to the patients in the hospital. A large theatre is provided in which entertainments and concerts are given, and outdoor recreation at suitable seasons is plentifully allowed and encouraged. The result is described as being in all respects a good one to the patients.

The next largest hospital in point of numbers at the same date, December 31, 1880, is the institution at Gladesville, where during the year a total of 988, or 496 males and 492 females, were under treatment. 247 first admissions, and 54 readmissions were registered, the discharges amounting to 161 males and 123 females, or 284 in all. These are arranged by the medical superintendent thus: 86 males and 51 females recovered; relieved, 16 males, 17 females; transferred, 21 males, 32 females; escaped and not recaptured, 2 males; and died, 36 males, 23 females, giving a death-rate on the average number resident of 8.60. Among the causes of insanity in those admitted, hereditary influence accounts for 30, intemperance for 18, epilepsy for 19, puerperal state 18, previous attacks 47, and in 114 no cause could be assigned. Some attention is deserving to the significant number of 47 patients out of 311 having been admitted for treatment on account of a recurrence of dangerous symptoms, and it cannot fail to suggest a reopening of the subject of premature discharge so often discussed in these pages. On this point further information is afforded in one of the general tables compiled by the Inspector-General, who records that the total number of readmissions during the year at all the hospitals under his supervision was 58, 54 of whom are credited to Gladesville. This yields a percentage of readmissions to total admissions of 12.39, but even this, as the Inspector-General points out, compares favourably with the numbers obtaining in English asylums, the percentage in them being 13.62 of total entries. In this calculation, in both instances, it should be said that transfers are not considered.

The Hospital of Newcastle held, on December 31, 1880, 228 patients, 124 being males and 104 females. Overcrowding here also is seriously complained of, and writing on the almost universal want of space in the hospitals visited by him, the Inspector-General thus delivers himself:

"For the year 1879 it was my duty to report that there were 263 patients in the public institutions in excess of the

number for whom there was proper accommodation—such accommodation being on the standard of cubic space fixed by the English Commissioners in Lunacy as the lowest compatible with health. During the year 1880, the only increase in the amount of accommodation was offered by the removal of the Superintendent of the Hospital for the Insane at Newcastle, from quarters in the main building, to a small detached residence formerly occupied by the Police Magistrate. This gave space for 17 patients with 2 nurses, and was occupied with patients as soon as some necessary alterations and repairs could be effected. Twenty-two patients found accommodation in the wards at Callan Park, and the remainder of the 88 were at the close of the year distributed in the already overcrowded dormitories at Gladesville, Paramatta, and Newcastle. Some minor and necessary alterations were made during the year which slightly affected the accommodation, and the following return shows this accommodation and the number of patients at the close of the year :

RETURN SHOWING NUMBER FOR WHOM THERE IS DORMITORY ACCOMMODATION, AND THE NUMBER IN HOSPITALS FOR THE INSANE, DECEMBER 31, 1880.

Institution	Number for which there is Dormitory Accommodation			Number in Hospital on December 31, 1880		
	Male	Female	Total	Male	Female	Total
Hospitals for the Insane :						
Gladesville	259	244	503	335	369	704
Paramatta (Free and Convict)	573	123	696	577	209	780
Do. (Criminal)	57	..	57	53	6	59
Callan Park	141	..	141	129	..	129
Newcastle	111	70	181	124	104	228
Temporary Hospital for the Insane :						
Cooma	56	..	56	64	..	64
	1,197	437	1,634	1,276	688	1,964
				1,197	437	1,634
Total Number in excess of accommodation				79	251	330

“ It is, I think, desirable to consider the extent and the character of the existing accommodation, both with regard to the steps which have already been taken to increase it, and to those which may be necessary in the future.”

Then, after detailing the improvements in course of construction, among which the erection of wooden buildings to accommodate 252, one-third the total number of female patients, he continues :

“ The experiment of housing the insane in wooden build-

ings has been tried to a greater extent in this Colony than in any other part of the world, and there can be no doubt but that such buildings can be erected more cheaply than more substantial structures, and serve admirably for the accommodation of certain classes of patients. They present, however, special danger from their liability to fire, they need frequent painting and repair, and the experiment has not yet been made long enough to enable a correct idea to be formed as to its ultimate economy.

“ Moreover, the experiment has now been carried to the fullest extent compatible with the safety and comfort of the patients, and experience has clearly shown that there are large classes, especially the more noisy, dangerous, and demonstrative, and all those in the acute stages of the malady, who cannot safely be placed in buildings of this kind. About one-third is the greatest number which can be placed in wooden buildings without danger or without imperilling the comfort and recovery of other patients.”

The extent of overcrowding at the Newcastle Hospital during 1880 was very considerable, 47 patients being there at the end of the year in excess of the number for whom adequate accommodation could be provided. The Inspector reports of it that—

“ At the close of the year 89 males and 83 females—a total of 172—were imbecile or idiotic, suffering from congenital defect, or an arrest of intellectual development, whilst the remainder were demented, the intellect after development having failed from different forms of brain disease. No less than 30 males and 32 females suffered from epileptic fits, but in several cases in which epilepsy was present on admission it had ceased under care and treatment, but not before it had permanently affected the mental condition. The majority of the patients—143 in number—were under 20 years of age.

“ The Institution had been quite free during the year from epidemic disease, and though measles were for months prevalent in the city, and several of the attendants’ children suffered, no patient was attacked. He attributed this result largely to the care exercised by the Superintendent, and to the excellent sanitary arrangements of the Hospital. In one case a patient was somewhat thoughtlessly forwarded from another Government institution only ten days after recovery from measles, but precautions were taken to isolate him after arrival and to prevent any chance of infection.”

The remaining hospital reports which are included, are the convict and criminal houses at Paramatta, the Callan Park Hospital for males only, and containing 129 patients, the

Cooma temporary hospital, and the Cook's River licensed house. Of the temporary hospital the Inspector-General reports more favourably than of any other institution visited by him in his official capacity. He writes that "the number of patients in this Hospital at the close of 1879 was 57, all males. Three patients were admitted direct, and seven were transferred from Gladesville, making a total of 67 under care. Of these one, an aged and feeble man, was transferred to Gladesville, and two died, leaving 64 on December 31, 1880. The death-rate was lower than at any other institution. The cause of death was epilepsy in one case and pulmonary consumption in the other."

At Darlinghurst a reception house for the insane is established, whence patients are drafted to permanent hospitals, or, if speedy recovery ensue after their admission, they are discharged either in the care of friends, or to the mercy of the law, according to their description as criminal or free patients. The following statement, showing the number of patients who passed into this reception house during 1880, and their ultimate disposal is interesting :

		Male	Female	Total
Remaining	.	3	1	4
Received	.	202	126	328
Sent to Gladesville	.	122	111	233
", Paramatta	.	2	...	2
", Callan Park	.	49	...	49
", Newcastle	.	1	...	1
", Cook's River	.	1	...	1
", Hyde Park Asylum	1	1
", Police Court	.	1	...	1
Discharged of Sound Mind	.	26	8	34
", to care of Friends	1	1
Died	.	1	2	3
Remaining 31st December, 1880	.	2	4	6

The licensed house for the insane at Cook's River is reported on in the highest terms by the Inspector-General, and it certainly appears as though a much greater degree of comfort was experienced there than in the public institutions. During 1880, five patients were admitted for the first time, one was readmitted, and nine transferred from the hospitals, which, with 133 in the house at the end of 1879, gives a total under treatment of 148. Of these four recovered, two were discharged relieved, two transferred, five died, and on December 31, 1880, there were left resident 135 patients. The recoveries give the very high percentage of 66.66 on the admissions, and the deaths reach an average of only 3.79 on the average number resident.

These results speak very well indeed for the efficient management and excellent arrangements of this Asylum, and this is evidently acknowledged by the Inspector-General, who pointedly remarks that even when his visits were quite unexpected, he never failed to find the patients well cared for and comfortable, and everything in good order in the Institution.

We have perused the report of the Inspector-General for New South Wales with very considerable interest, and while there is a good deal of evidence in it of a need for sweeping changes in the arrangements made on behalf of the Colonial insane, we can notwithstanding congratulate the author of the report on the conspicuous care with which his share of the labour has been accomplished, and also on the admirable assistance rendered to him by the various hospital medical superintendents.

*Eighth Annual Report of the Western Hospital for the Insane
of the State of Wisconsin.*

THE trustees' report on the operations of the Asylum under their control in Wisconsin, puts the amount per head required for maintenance of patients in the institution at \$4 $\frac{1}{4}$, equivalent to about 17s. 9d. sterling, per week. This sum is somewhat in excess of that which is regarded as sufficient to support a patient for the same time in this country, since a usual charge of 15s. is made on account of pauper patients transferred to private institutions. The expenditure on account of buildings and improvements is reduced to a minimum, as the trustees point out, by the fact that in this institution it is not considered necessary to have high wire or wood fences such as are common in many other places; they say these have never been required, considering it more advisable to permit the fullest amount of freedom from restraint both inside and outside, consistent with the well-being of each individual. There exists a growing tendency in this direction, on the part of American asylum officials, and the consequences attending the introduction of greater freedom have, in all instances reported, been of a beneficial kind.

The report of the superintendent, Dr. Walter Kempster, shows a total of 719 patients; 363 male, and 356 female patients under treatment during the year; and under "discharged," we find 42, male, 22, females, 20; recovered, 77, 28 men, 43 women; improved, 77 males, 38 females; unimproved, 39; and two women sent away as not being insane. Deaths numbered 38, 23 being men, 15 women. The ages of the re-

covered patients varied from 20 to 80, and the causes are arranged in a table from which it appears that phthisis is held accountable for 14 of the whole, four of them being males; chronic brain wasting is credited with three deaths; general paresis two; and acute meningitis two. Here once more we cannot refrain from expressing a wish that facilities were generally existent to enable accurate histological reports to be made on all the cases of death in asylums; and, in the case under notice, if the energetic superintendent had spent on this work the time devoted in writing the elaborate psychogicomedical essay appended to his account of the year's work, we venture to think a much greater amount of permanent good would have resulted. This lengthy paper is in many respects excellent reading, but the views it propounds ought to be familiar to all well educated superintendents. When he deals with more practical questions, Dr. Kempster is more likely to effect good by suggesting food for general reflection. For instance, his inquiry into the causes for a preponderance of cases of dementia and melancholia among the admissions into the asylum. He has been struck by the continuance of this excessive proportion, even after the exciting causes primarily set down had been removed. After referring to the numbers in foreign institutions, he adds :

" In this hospital the percentages are as follows : of those admitted with the asthenic form of disease, as melancholia and dementia, there were 17.11 per cent. native and 22.04 per cent. of foreign born, a total proportion of 39.15 per cent. of the asthenic (depressed) type, against 6.86 per cent. of native, and 7.06 per cent. of foreign born, or a total of 13.92 per cent. of the sthenic. In other words, the number of those admitted into the Northern Hospital, with melancholia and dementia, is 19.60 per cent. greater than it is in foreign hospitals, having only the native born as patients, and 14.03 per cent. greater than in the eastern hospitals where nationalities are more nearly equal than they are here. Thus, in foreign institutions where all, or nearly all of those admitted are native born, there are 6.11 per cent. more cases of the asthenic than of the sthenic forms."

A table showing probable exciting causes in those admitted into the asylum, gives "scrofulosis" as the cause in 23 cases; "intemperance" in 15; "subacute meningitis" in 14; hereditary, either alone, or with other causes, 15; and unknown, 34. The total number of admissions for the year was 173, 92 being men. The total number under treatment for the twelve months reached 719, 303 of whom were males; and a series of instructive and carefully prepared tables, relating to these numbers is

appended to the reports of the medical officer. This is well conceived and well executed, and exhibits the institution it refers to as in an excellent condition, and one on which the executive is to be congratulated.

Twenty-third Annual Report of the Nova Scotia Hospital for Insane, for the year 1880.

THE medical superintendent of the Nova Scotia Hospital for Insane, reports that during 1880 there were under his care 453 patients, of whom 43 were discharged as recovered, 28 as improved, and 1 as unimproved, while 20 died in the institution, bringing the whole number discharged to 92. The death-rate is given as 4·4 of the whole number under treatment, and on the admissions 22·47; the number of new entries having been 89, of whom no less than *twenty-five had formerly been inmates*, viz., 17 once, 5 twice, 2 three times, and 1 four times; 21 of these readmissions, it is instructive to learn, had been discharged as recovered, while only one had gone out "unimproved," and only three as "improved." Among the 20 deaths is included that of one man, by suicide, through jumping from a window. The superintendent reports that only 20 per cent. of the windows are guarded, and it is to be hoped so serious an oversight may not longer continue to facilitate suicidal dangers on the part of patients.

On the subject of "recoveries," the superintendent offers the following remarks. We would draw attention especially to the lines we have italicised, they bear their own suggestive moral.

"The recovery rate has been very favourable (48·3), nearly fifty per cent., the mean of all former years being (43·1) forty-three; but less than last year (54), fifty-four per cent.

"Recovered patients are always discharged on trial, so that we have a satisfactory report from the friends as to the recovery of the patient before the final discharge. The monthly average of patients continually out on trial, for the past year, has been (12½), twelve and half persons. Even the two cases that go to swell the death-rate, who died from incidental causes when out on trial, would have appeared as recoveries, if after two months there had been no recurrence of insanity, and this would in all probability have been the case.

"Patients discharged as 'improved,' are also on trial for a varying period before their final discharge.

"Our recovery rate is much above the average of other insane asylums and hospitals, because from limited accommo-

dation a preference is given to those labouring under acute disease, such cases (for this hospital is specially designed for their accommodation) are never refused admission.

"As previously stated (43) forty-three cases, different persons, have left the hospital so well as to be able to fill their accustomed places in society. *Among these were nine who had been discharged as recovered in previous years—six of whom were each discharged once, two twice, and one three times, making in the hospital statistics 13 recoveries from these nine persons in addition to their discharges this year.* Thirty-four (34) had never previously been under treatment."

The treatment of the insane is dwelt on at some length in the report, and is intended apparently for the information of the public in this matter. We have room only for one quotation from this part of the paper.

"We treat our violent cases as we would children. If they tear clothes, we put on raiment too strong to be torn; if they strip themselves, we button or tie the clothing so that it cannot be undone by the patient. If they pick the face or scratch themselves, we sew up the sleeves of the dress or jacket so that the fingers cannot be used for such a purpose. If they pound with their hands so as to hurt themselves, or if they strike others, we muffle the hands; but every patient who is physically able has the free run of the hall inside, and the grounds outside, along with the other patients."

A number of carefully constructed tables are appended to the Report, which is generally well compiled and instructive.

APPOINTMENTS.

Benham, Harry A., M.B., C.M., L.S.A.L., Assistant Medical Officer to the Royal Lunatic Asylum, Dundee.

Boores, J. I., M.R.C.S., Medical Superintendent of the Wilts County Asylum.

Christie, I. W. S., L.R.C.P.Ed., Assistant Medical Officer to the Leavesden Asylum, Watford.

Cooke, E. M., M.B., M.R.C.S.Ed., Medical Superintendent of the County and City of Worcester Asylum, Powick.

Dodds, W. J., M.D., D.Sc., Assistant Medical Officer to the Birmingham Borough Asylum.

Griffith, J. de B., M.B., M.C.L., Resident Medical Officer at the Yarra Bend Lunatic Asylum, Melbourne.

Huxtable, L. R., M.B., C.M., Edin., Assistant Medical Officer to the Border County Asylum, Melrose.

Johnston, J. A., L.R.C.S.I., Assistant Medical Superintendent of the Monaghan District Lunatic Asylum.

Jones, D. J., M.D. Edin., M.R.C.S., Junior Assistant Medical Officer to the Kent County Asylum, Barming Heath, near Maidstone.

Middleton, W. H., L.R.C.P.S., Visiting and Consulting Physician to the Mullingar Lunatic Asylum.

Shapley, F., M.R.C.S., L.S.A., Assistant Medical Officer to the Glamorgan County Lunatic Asylum, Bridgend.

Strahan, S. A. K., M.D., Medical Officer to the County Asylum, Berry Wood, Northampton.

Suffern, A. C., M.D., Assistant Medical Officer to the East Riding Asylum, Beverley.

Thomson, A., M.B., Assistant Medical Officer to the Montrose Royal Lunatic Asylum.

Walmsley, F. H., M.D., Senior Assistant Medical Officer to the Metropolitan Asylum, Leavesden.

Young, W. Mussen, M.D., Assistant Medical Officer to the Suffolk County Asylum.

INDEX TO VOLUME VII.

Abnormal Dryness of the Skin Joints and Mucous Membranes, 107.
Abnormalities of the Secretions, 107.
Abscess of the Liver, Aspiration in, in Hypochondriacal Melancholics, 89.
Acute Mania with Delusions, 19.
Agaraphobia, 104.
Albuminous Urine in Epileptics, 92.
Albuminuria during Paralytic Insanity, 271.
Alimentation, Compulsory, 92.
American Journal of Insanity, 284.
Appleton, Dr., Life and Literary Remains of, 132.
Appointments, 156, 303.
Aspiration in Abscess of the Liver in Hypochondriacal Melancholics, 89.
Astraphobia, 104.
Asylums, Private, 184.
" Public, 177.
" The, of Europe, 53.
Atonic Voice, 100.
Barnes, Dr. Fancourt, German-English Dictionary of Medical Terms, 94.
Beaconsfield, Lord, viewed Psychologically, 265.
Beard, Dr. G. M., The Asylums of Europe, 53.
Beard, Dr. G. M., on Mental Exhaustion, 96.
Beard, Dr. G. M., Problems of Insanity, 151.
Bibliographical Notices, Reviews and, 94, 282.
Billing, Dr., In Memoriam, 281.
Blindness and Deafness, On the Treatment of, resulting from Cerebro-spinal Meningitis by the constant current of Electricity, 70.
Blushing, Frequent, 104.
Browne, Dr. W. A. F., on Mania Errabunda, 216.
Browne, Dr. W. A. F., In Memoriam, Dr. Isaac Ray, 279.
Carlyle, Thomas, viewed Psychologically, 158.
Causes, The, of Insanity, 83.
Cerebral Irritation, 97.
" Temperature, Exploration of, 89
Cerebro-spinal Meningitis, 70.
Changes in the Expression of the Eye, 99.
Chills, General and Local, 114.
Claustrophobia, 104.
Coccygodynia, 109.
Common Law, Codification of the, as to Insanity, 211.
Compulsory Alimentation, 92.
Congestion of the Conjunctiva, 99.
Contribution to the History of the Development of the Human Race, 135.
Control, Deficient Mental, 100.
Convulsive Movements, 112.
Cramps, 112.
Davey, Dr., Transference of Special Sense, 37.
Deafness and Blindness, On the Treatment of, resulting from Cerebro-spinal Meningitis, 70.
Deficient Mental Control, 100.
" Thirst, 106.
Delirium of Persecution, Hallucinations in, 91.
Delusions, Acute Mania with, 19.
Desire for Stimulants and Narcotics, 106.
Development, The Mental, of the Infant of To-day, 62.
Dictionary, German-English, of Medical Terms, 94.
Dilated Pupils, 98.
Diseases of the Nervous System, 282.
Disturbance of the Nerves of Special Sense, 99.
Dreaming, The Origin and Growth of, 222.
Drowsiness, 104.
Dyspepsia, Nervous, 105.
Dysphagia, 112.
Ears, Noises in the, 99.
Ellicott, Bishop, on the Being of God, 94.
England, Lunacy in — England's Irrational Wesen, 174.
English Lunacy Law, 189.
Epileptics, Albuminous Urine in, 92.
Epitomised Translations, 89.
Europe, The Asylums of, 53.
Exhaustion, Feeling of Profound, 114.
Exploration of Cerebral Temperature, 89.
Eye, Changes in the Expression of the, 99.

Fear, Morbid, 102.
 Feet, Sweating, 107.
 Fidgetiness, Flushing and, 104.
 Flushing and Fidgetiness, 104
 France, Legal Medicine in, 242.
 Frequent Blushing, 104.
 Geizer, Lazarus, Contribution to the History and Development of the Human Race, 135.
 German-English Dictionary of Medical Terms, 94.
 God, Six Addresses on the Being of, 94.
 Granville, Dr. Mortimer, The Secret of a Good Memory, 121.
 Guy, Dr., The Factors of the Unsound Mind, 126.
 Gynephobia, 104
 Hallucinations in Delirium of Persecution, 91.
 Hands, Sweating, 107.
 Headache, Sick, and various forms of Head Pain, 98.
 Heart, Irritable, 111.
 Heaviness of the Loins and Limbs, 109.
 Hemi Neurasthenia, 117.
 Hopelessness, 102.
 Hospitals for the Insane, 122.
 Human Race, Contributions to the History and Development of the, 135.
 Hypochondriacal Insanity, 30.
 " Melancholies, Aspiration of the Liver in, 89.
 Idiocy, 22.
 Idiosyncrasies, Special, in regard to Food Medicine and External Irritants, 112.
 Imbecility, 2.
 In Memoriam, Dr. Isaac Ray, Dr. Archibald Billing, 279.
 Infant, The Mental Development of the, of To-day, 62.
 Insane, Hospitals for, 122.
 Insanity, *American Journal of*, 284.
 " Codification of the Common Law as to, 211.
 Insanity, Hypochondriacal, 30.
 " Prevention of, 150.
 " Problems of, 151.
 " Prophylaxis of, 32.
 " Tests of, 149.
 " The Causes of, 83.
 Insomnia, 105.
 Irritability, Mental, 101.
 Irritable Heart, 111.
 Irritation, Cerebral, 97.
 Joints, Abnormal Dryness of, 107.
 Kirkbride, Dr., on Hospitals for the Insane, 122.
 Law, The Common, Codification of, as to Insanity, 211.
 Law, Lunacy—Reform, 78.
 " The English Lunacy, 189.
 Legal Medicine in France, 242.
 Local Spasms of Muscles, 111.
 Localised Peripheral Numbness and Hyperesthesia, 113.
 Loins and Limbs, Heaviness of the, 109.
 Lunacy in England, 174.
 " in Scotland, 274.
 " Law, The English, 188.
 " " Reform, 78.
 Maclagan, Dr. T. J., on Rheumatism, 284.
 Madhouse, A Turkish, 144.
 Mania, 11.
 " Acute, with Delusions, 19.
 " Errabunda, 216.
 Mann, Dr. E. C., on the Treatment of Blindness and Deafness resulting from Cerebro-spinal Meningitis, by the constant current of Electricity, 70.
 Mann, Dr. E. C., on the Codification of the Common Law as to Insanity, 211.
 Materialism at the International Medical Congress, 233.
Medical Record, New York, 285.
 Medicine, Legal, in France, 242.
 Melancholia, 26.
 Memory, Secret of a Good, 121.
 Meningitis, Cerebro-spinal, 70.
 Mental Control, Deficient, 100.
 " Development, The, of the Infant of To-day, 62.
 Mental Irritability, 101.
 Mind, The Factors of the Unsound, 126.
 Mitchell, Dr. S. Weir, on Diseases of the Nervous System, 283.
 Monophobia, 104.
 Morbid Fear, 102.
 Mucous Membranes, Abnormal Dryness of, 107.
 Muscle, Volitantes, 99.
 Muscles, Local Spasms of, 111.
 Mysophobia, 104.
 Narcotics, Desire for, 106.
 Nervous Dyspepsia, 105.
 " Exhaustion, 97.
 " System, Diseases of, 282.
 Neuralgias, Flying, 114.
 Neurasthenia, 97.
 " Hemi, 117.
New York Medical Journal, 286.
 " Record, 285.
 " State Asylum for Insane Criminals, 140.
 Noises in the Ears, 99.
 Non-restraint, Restraint and, 90.

Numbness, Localised Peripheral, and Hyperaesthesia, 113.

Opium-eating Teetotallers, 74.

Pains in the Back, 109.
" Shooting, 110.

Pantophobia, 104

Paralytic Insanity, Albuminuria during, 270.

Pathophobia, 104.

Peculiarities of Pain in the Back, 109.

Persecution, Hallucinations in Delirium of, 91.

Phobophobia, 104.

Podalgia, 110.

Poets, Psychology in our, 1.

Prevention of Insanity, 150.

Private Asylums, 184.

Prophylaxis of Insanity, 32.

Pruritus, 114.

Psychological Retrospect, 144.
" Study of Shakespeare, 193.

Psychology in our Poets, 1.

Public Asylums, 177.

Pupils, Dilated, 98.

Ray, Dr. Isaac, In Memoriam, 279.

Reports:
Commissioners in Lunacy for Scotland, 118.
Illinois Eastern Hospital for the Insane, 143.
Kingston, Ontario, 291.
New South Wales, 293.
Nova Scotia, 301.
State Asylum for Criminals, Auburn, New York, 140.
State Lunatic Asylum, Northampton, Mass., 141.
Utica State Lunatic Asylum, 287.
Wisconsin, 299.

Restraint and Non-restraint, 90.

Retrospect, Psychological, 144.

Reviews and Bibliographical Notices, 94, 282.

Rheumatism, 284.

Robertson, Dr. C. Lockhart, on Lunacy in England (England's Irren-Wesen), 174.

Ross, Dr. James, on Diseases of the Nervous System, 282.

Salivation, 108.

Scalp, Tenderness of the, 97.

Scotland, Twenty-second Annual Report of Commissioners in Lunacy, 118.

Scotland, Lunacy in, 274.

Secret of a good Memory, 121.

Semple, Dr. R. H., on a Psychological Study of Shakespeare, 193.

Sense, Disturbances of the Nerves of, 99.
" Special Transference of, 37.

Sensitiveness to Changes in the Weather, 113.

Shakespeare, A Psychological Study of, 193.

Shooting Pains, 110.

Sleep, Convulsive Movements on going to, 112.

Spine, Tenderness of, 108.

State Asylum for Insane Criminals, Auburn, New York, 140.

State Lunatic Asylum, Northampton, Mass., 141.

Stimulants and Narcotics, Desire for, 106.

Sweating Hands and Feet, 107.

Teetotallers, Opium-eating, 74.

Temperature, Exploration of Cerebral, 89.

Tenderness of the Scalp, 97.
" Spine, 108.

Tests of Insanity, 149.

Theomania, 15.

Thirst, Deficient, 106.

Ticklishness, 114.

Transference of Special Sense, 37.

Translations Epitomised, 89.

Turkish Madhouse, 144.

Urine, Albuminous, in Epileptics, 92.

Vague Pains and Flying Neuralgia, 114.

Visual Disturbances Experienced, 237.

Voice, Atonic, 100.

Volitantes Muscae, 99.

Weather, Sensitiveness to Changes in the, 113.

Winn, Dr., Materialism at the International Medical Congress, 233.

Winn, Dr., Prophylaxis of Insanity, 32.
" Reviews, 96.

Wyma, The Mental Development of the Infant of To-day, 62.

Wyma, on the Origin and Growth of Dreaming, 222.

LONDON: PRINTED BY
SPOTTISWOODE AND CO., NEW-STREET SQUARE
AND PARLIAMENT STREET

CONTENTS OF PART 1, VOL. IV.

I. Modern Pseudo-Philosophy. By J. M. WINN, M.D.—II. Nuggets, Gold and other Dust from various Diggings.—III. Is "Palaeolithic Man" a Reality of the Past or a Myth of the Present? By N. WHITLEY, C.E.—IV. On the Evidence of the Dillwyn Committee. By JAMES RORIE, M.D.—V. Athetosis. By A. C. MUNRO, M.B.—VI. The Brain in Health and Disease. By E. C. MANN, M.D.—VII. Diseases of the Nervous System. No. V. By ROBERT BOYD, M.D.—VIII. Catalepsy consequent upon an Attack of Acute Mania—Recovery.—IX. Insanity in Massachusetts.—X. The St. Clement's Asylum at Venice.—XI. Case of Opium Habit and Chloral Habit combined. By E. C. MANN, M.D.—XII. Mental Disorders. By JOHN CURWEN, M.D.—Reviews, &c.—Psychological Retrospect—Appointments.

CONTENTS OF PART 2, VOL. IV.

I. Mad Poets. No. I.—II. Prevention of Disease, Insanity, Crime, and Panperism. By N. ALLEN, M.D.—III. Suicide in its Social Relations. By J. G. DAVEY, M.D.—IV. Is "Palaeolithic Man" a Reality of the Past or a Myth of the Present? No. II. By N. WHITLEY, C.E.—V. A Case of Moral Insanity. By A. C. MUNRO, M.B.—VI. Lunacy in England.—VII. Lunacy in Scotland.—VIII. "Felo-de-se." By W. R. HUGGARD, B.A., M.D.—IX. A Last Word for Constance Kent. By J. M. WINN, M.D.—X. The Case of the Rev. Mr. Dodwell.—Correlation of Force in Hereditary Disease.—Reviews, &c.—Appointments.

CONTENTS OF PART 1, VOL. V.

I. Constance Kent and the Road Murder. By JOHN PAGET, Barrister-at-Law.—II. Mind, and Living Particles. By J. M. WINN, M.D.—III. Mad Poets. No. 2.—IV. Idiocy. By FREDERIC BATEMAN, M.D.—V. Pathology and Treatment of Cerebral Disease. By R. H. SEMPLE, M.D.—VI. The Physiology of Nightmare. By EDWIN WOOTON.—VII. Notes on the localisation of Diseases of the Brain. By C. K. MILLS, M.D.—VIII. Psychology of Hamlet. By the EDITOR.—IX. What can be done with Criminal Lunatics?—Reviews.—Appointments, &c.

CONTENTS OF PART 2, VOL. V.

I. Charles Lever, M.B., LL.D. By J. M. WINN, M.D.—II. Notes on the Physiological Pathology of the Brain. By J. G. DAVEY, M.D.—III. Education of Girls, connected with Growth and Physical Development. By NATHAN ALLEN, M.D.—IV. Mental Responsibility and the Diagnosis of Insanity in Criminal Cases. By EDWARD C. MANN, M.D.—V. The Lunacy Laws.—VI. Lunacy in England.—VII. Lunacy in Scotland.—VIII. Lunacy in America.—IX. Microcephalism.—X. Private Asylums.—XI. The British Association for the Advancement of Science. By J. M. WINN, M.D.—Reviews—Psychological Retrospect—Psychological Peculiarity—Medical Proprietors of Private Asylums—Appointments.

CONTENTS OF PART 1, VOL. VI.

I. The Collapse of Scientific Atheism. By J. M. WINN, M.D.—II. Mad Artists.—III. The Curability of Insanity. By W. A. F. BROWNE, LL.D.—IV. Psychology in its Relation to Medicine. By Major GREENWOOD, M.R.C.S.E.—V. On General Paresis. By A. E. MACDONALD, M.D.—Discussion on Private Lunatic Asylums—Commission of Lunacy on the Rev. W. Basset—Translations from French Journals—Reviews and Bibliographical Notices—Appointments.

CONTENTS OF PART 2, VOL. VI.

I. The Study of Medical Psychology—Circles of Mental Disorders—Modern Nervous Diseases—Education in Relation to Mental Diseases. By J. Crichton BROWNE, M.D.—II. Asylum Supervision. By NATHAN ALLEN, M.D., LL.D.—III. The Centralisation of Energy. By EDWIN WOOTON.—IV. Psychological Aspect of the Laros Case, on the Trial of Allen C. Laros, at Easton, Pennsylvania, U.S.A., for the Murder of his Father, Martin Laros, by Poison, the Defence being based upon the Allegation of Epileptic Insanity. By EDWARD C. MANN, M.D.—V. Lunacy in England.—VI. Lunacy in Scotland.—VII. Lunacy in New South Wales.—VIII. Fasting and Feeding. By the EDITOR.—IX. Dr. Bucknill and Private Asylums.—X. The British Association Picnic at Swansea. By J. M. WINN, M.D.—XI. Epidemical Contagion in Spiritualism.—Reviews and Bibliographical Notices.—Appointments.

CONTENTS OF PART 1, VOL. VII.

I. Psychology in our Poets.—II. Prophylaxis of Insanity. By J. M. WINN, M.D.—III. Transference of Special Sense. By J. G. DAVEY, M.D.—IV. The Asylums of Europe. By G. M. BEARD, M.D.—V. The Mental Development of the Infant of To-day.—VI. On the Treatment of Blindness and Deafness resulting from Cerebro-Spinal Meningitis, by the Constant Current of Electricity. By EDWARD C. MANN, M.D.—VII. Opium-Eating Teetotallers.—VIII. Lunacy Law Reform.—IX. The Causes of Insanity.—X. Epitomised Translations.—Reviews and Bibliographical Notices.—Psychological Retrospect.—Appointments.

CONTENTS.

ART.	PAGE
I. Thomas Carlyle Viewed Psychologically	157
II. Lunacy in England. (<i>England's Irren-Wesen.</i>) By C. LOCKHART ROBERTSON, M.D., F.R.C.P.L., &c. .	174
III. A Psychological Stndy of Shakespeare. By R. H. SEMPLE, M.D., F.R.C.P.L., &c.	193
IV. Codification of the Common Law as to Insanity. By E. C. MANN, M.D.	211
V. Mania Errabunda. By W. A. F. BROWNE, LL.D. .	216
VI. The Origin and Growth of Dreaming	222
VII. Materialism at the International Medical Congress. By J. M. WINN, M.D.	233
VIII. Visual Disturbances Experienced	237
IX. Legal Medicine in France	242
X. Lord Beaconsfield Viewed Psychologically	265
XI. On Albuminuria during Paralytic Insanity	270
XII. Lunacy in Scotland	274
In Memoriam—Dr. Isaac Ray, Dr. Billing	279
Reviews and Bibliographical Notices	282
Appointments	303

P
Med J Journal of Psychological Medi-
J cine and Mental Pathology.

N.S. Vol. 7² (1881)

ppoi

3